

Occupational Medicine

Specialty Specific Guidance (SSG)

This guidance is to help doctors who are applying for entry onto the Specialist Register via the Portfolio pathway in Occupational Medicine (OM). You will also need to read the [Occupational Medicine Curriculum documentation](#)

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Introduction

You can [contact us](#) and ask to speak to the GMC Specialist Applications team for advice before you apply. You are strongly advised to contact the Faculty of Occupational Medicine for guidance **before** you submit your application. The Faculty of Occupational Medicine can be contacted at training@fom.ac.uk

Standard of assessment

The standard of assessment that Portfolio applications are assessed against is the **Knowledge, Skills, and Experience (KSE) for specialist or GP practise in the UK.**

Currency of evidence

In general, you should provide evidence from your last six years of clinical practice (Whole time equivalent (WTE), does not need to be consecutive). Certain items can, however, be older than this. These include:

- Exam passes
- Postgraduate diplomas
- Evidence of attainment of Common Professional Capabilities in Core Training
- ARCP outcomes from Core Training
- Other evidence from Core Training as indicated in the section on Core Training below
- References from Core Training
- Research, including peer-reviewed publications
- A high quality project which demonstrates several learning outcomes well
- A presentation or poster given at a regional, national or international conference

The following examples may also be older, but more recent evidence of each is also required:

- One workplace visit (one of at least four)
- One environmental impact assessment (one of two)
- One example of teaching (one of at least four)

- One audit (one of at least two) if relevant to Occupational Medicine practice
- CPD of relevance to Occupational Medicine practice
- Clinical governance work relevant to Occupational Medicine practice e.g. related to relevant legislation or to the management and/or provision of Occupational Health services
- Evidence of management practice

Submitting your evidence

Do not submit original documents. You must provide your evidence electronically – it's important that you follow the structure in our [user guide](#) when doing so.

All your copies, other than qualifications you're getting authenticated **must** be accompanied by a pro-forma signed by the person who is attesting to the validity and accuracy of your evidence (your verifier). It's very important that you read an explanation of how to do 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](#).

Your evidence **must** be accurate, and may be verified at source should we have any queries or justifiable doubts about the accuracy of your evidence. All evidence submitted will be cross checked against the rest of your application and documents.

Anonymising your evidence

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

- All patient/worker identifying details
- Details of patients'/workers' 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 do not need to be anonymised:
 - Gender

- Date of birth

It is important that you read and follow our [guidance](#). If your evidence does not meet these requirements, it may not be included in your application.

How much evidence to submit

This guidance on documents to supply is not exhaustive and you may have alternative evidence. You do not have to supply every type of evidence listed, but you must submit sufficient evidence to address each of the required sections and the associated capabilities.

Your evidence **must** cover the knowledge, skills and experience to demonstrate the required sections and capabilities in all areas of the [Occupational Medicine CCT curriculum](#). If evidence is missing from any area of the curriculum, the application may fail.

Some of the suggested evidence can be relevant in more than one area of the curriculum. If you have an item of evidence that is relevant to more than one area, do not include multiple copies in your evidence. Instead, provide one copy and list it in your application under each relevant area, stating that the document is located elsewhere, and you would like to cross-reference it. The following table indicates where certain types of evidence may be relevant to more than one sections:

Item of evidence required	Minimum numbers
Workplace-based assessments	Mini-CEX – 12 CBDs – 24 DOPs – 14 SAIL OH 1 – 4 SAIL OH 2 – 4 Please see note below

CPD	See note below
Reports to management	44, but please see note below
Teaching and presentations	4
Case histories	See note below
Multi-source feedback	4, but please see note below
Workplace visit reports	4
Audit	2
Teamwork	See note below

Note: CPD, teaching and presentations may be specific to certain sections, thus in these cases, examples may need to be included under more than one section.

Case-based discussions (CBDs) must include examples of various types of case, including complex cases (at least four cases), long-term absence (at least three), short-term absence (at least three), mental ill health (at least three), musculo-skeletal conditions (at least three), pre-employment cases (at least two) and ill health retirement cases (at least two). *Please note that more than one of these situations can be covered in any CBD, although you should still aim to submit at least 24 CBDs.*

Directly observed procedural skills (DOPS) must include examples of practical procedures, including both spirometry and audiometry as well as communications procedures such as case conferences (at least two of the latter)

Multisource feedback refers to colleague feedback, for which four reports are required, but also patient/client feedback for which two reports are expected

Reports to management must include cases of long-term sickness absence (at least eight cases), short-term sickness absence (at least eight), ill health retirement (at least six), pre-employment (at least four), occupational diseases or conditions (at least four), mental ill health including stress (at least four), significant workplace risks such as from chemical or physical hazards (at least two) and cases where health promotion advice has been given (at least four). You should also aim to include cases where advice relating to travel overseas has been given (at least four). *Please note that more than one of these situations can be covered in any report, thus the total number of reports to be submitted may well be less than 44.*

Case histories may be submitted as alternatives to reports to management, although should still include evidence of the advice given to management. At least eight would be expected, covering the range of situations indicated in the above paragraph covering reports to management.

CPD does not need to meet any specific numerical requirement – quality rather than quantity is important – but it is recommended that GMC standards for this are met.

Teamwork likewise does not need to be demonstrated in numbers, but rather types of activity as stated in the relevant sections below.

Overall, it is recommended that you should be assessing at least 400 cases per year as an absolute minimum (including if you work less than full time).

Note that additional recommendations about quantity of evidence are included in the sections detailed below.

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.

As a general guide, we would not expect more than 1,200 pages of evidence.

You must ensure you follow our [guidance](#) on how to present and group your evidence in the online application

Organising your evidence

Your evidence will need to be organised to reflect the structure of the online application. You should submit your evidence electronically under the correct section of your online application. [If you submit any hard copy evidence, you will need to create your own dividers to confirm which section of the application the hard copy evidence relates to and clearly indicate this within your online application.]

You should also submit the evidence requested about your training, qualifications and employment history and your CV in the format set out in the GMC's [CV guidance](#).

Structured reports

The GMC Specialist Applications team will give you advice on gathering structured referee reports to support your application. Three structured reports are required. At least two must be from Consultants in Occupational Medicine, while one can be from a Nurse Manager or another senior professional such as an HR Director, Health and Safety Manager or Director, or a senior healthcare practitioner who has worked with you. We also strongly recommend that your referees are able to provide detailed support for your capabilities across all or most areas, and understand the requirements for specialist training in Occupational Medicine and Specialist Registration in the UK.

Where we ask in our guidance, please group your evidence together to keep the number of individual electronic uploads manageable. This will need to be done prior to uploading on the GMC application. There are many software solutions widely available that can be used for converting documents/excel sheets/PowerPoint presentations and images to PDFs and combining PDF documents. Please see Annex C for more information about how to upload your evidence.

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.

Advice from your evaluators

Your chances of making a successful application are likely to be increased if you make use of the following tips:

- Gather your evidence “as you go” rather than trying to recover it at the time when you make your application
- Identify gaps in your evidence
- Make a plan
- Keep your existing evidence under review to ensure you will submit the best examples in your application
- Make sure you are covering the whole range of the training curriculum and are undertaking substantial clinical and other relevant work during all your years of working towards your application
- Keep your application balanced with appropriate amounts of evidence for each area – remember “a lot doesn’t compensate for a lack”
- Consider the use of templates where appropriate
- Seek advice e.g. from FOM, SOM support groups (consider joining the latter) and websites including FOM and GMC
- Identify a supervisor or mentor with whom you can check the quality and quantity of your evidence, preferably at various time points during your work towards your application
- Refer constantly to this document and other written guidance and make sure you are using the most up to date versions
- Take as much time as you need to prepare for your application
- Before applying, check and re-check everything you have
- Ensure your evidence is well organised

Unsuccessful applications or poor evidence

It is our experience that applications from doctors in the specialty of Occupational Medicine have been submitted with inadequate or poor evidence in areas such as:

- Audit
- Management and Leadership
- Health surveillance and health promotion
- Insufficient numbers of workplace-based assessments
- Reflection on activities

Section 1 - Knowledge, skills and performance

You can see below the evidence you must submit in these general areas. It is useful to submit evidence of your training as background evidence – this allows the evaluators to see your whole career pathway.

Qualifications	
Primary medical qualification (PMQ)	<p>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.</p> <p>If you do not hold registration, you will need to have your PMQ independently verified before we can grant you full registration with a licence to practise.</p> <p>You can find out more about primary source verification on our website.</p> <p>You only need to get your PMQ verified by our provider. The rest of your evidence should be verified in line with our guidance.</p>
Specialist medical qualification(s)	<p>Please provide a copy of all specialist medical qualifications you hold.</p> <p>Where qualifications were awarded outside of the UK you must provide an authenticated copy via post.</p> <p>Applicants must demonstrate appropriate tests of knowledge as required in the curriculum, which include:</p> <ul style="list-style-type: none">● Diploma in Occupational Medicine of the Faculty of Occupational Medicine of the UK (D Occ Med)● Associate of the Faculty of Occupational Medicine (AFOM).● Membership of the Faculty of Occupational Medicine (MFOM) Part 1 and Part 2 .● A pass in the MFOM (Ireland) exams is considered comparable to the UK MFOM Part 2/AFOM exam. <p>If applicants do not hold the above or a comparable qualification, they can aim to demonstrate the same level of knowledge by providing:</p>

- A detailed, thorough and succinct cross-referencing mapping exercise, demonstrating how each and every competency set out in one of the above has been covered in their own qualifications. It will then be for the evaluators to determine whether what has been provided is comprehensive enough to demonstrate the same level of knowledge as one of the above qualifications.
- Applicants must be aware that as no other qualifications are considered directly comparable, it will be assessed on a case by case basis and will require the applicant to produce a detailed and complex portfolio of evidence.
- 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. Undertaking one of the above qualifications is the best way to demonstrate appropriate knowledge.

Please note that a copy of the curriculum you followed is required for any non FOM qualification.

Core training

You must provide evidence of having demonstrated Common Professional Capabilities in Core Training prior to working in Occupational Medicine (or be doing so alongside your work in Occupational Medicine).

For Portfolio Pathway applicants, evidence demonstrating an indicative two years of work in core training from one single area of medicine should be provided. To demonstrate this, you should provide:

- A postgraduate diploma e.g. MRCGP, MRCP, MRCS
- ARCP Outcome 1 or 6 in an area of medicine/Core Medical Training
- Detailed reference from a Consultant for whom you worked in the specialty
- Certificate of Completion of Common Professional Capabilities (<https://www.oriel.nhs.uk/Web/ResourceBank>)

If you are not able to provide one of the above, examples of three of the below items, confirming your competence in a medical specialty, should be provided:

- Appraisals
- WBAs (at least 2 CBDs, 2 Mini-CEX, 2 DOPS and, if possible, 2 assessments of reports)
- Research, including publications

- Clinical governance
- Leading a project
- Audit
- Teaching
- Presentations and/or posters

Assessments and appraisals

Appraisals and assessments

If you hold a licence to practice, please submit an appraisal document from the last 12 months of clinical practice, with summaries (only) of appraisals from the preceding four years of clinical practice. For those working outside the UK, please refer to the NHS England appraisal template, which details what should ideally be covered in alternative/non-UK appraisals/reviews, and include evidence from at least three of the past five years of clinical practice.

Recent specialist training

If you have worked in posts approved for a specialist training programme for a relevant qualification outside the UK in the past six years of practice (Whole Time Equivalent (WTE), does not need to be consecutive), please provide an **authenticated copy** of the curriculum or syllabus 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.

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, the curriculum must demonstrate how you were assessed. A detailed letter of verification from an educational supervisor would satisfy this requirement.

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

	<p>If you have undertaken approved specialty training in Occupational Medicine in the UK in the past six years of practice (Whole Time Equivalent - WTE), which do not need to be consecutive, you should provide a copy of your ARCP outcome forms and Educational Supervisors' reports. The latter will need to confirm your participation in activities listed in the specialty curriculum programme of assessment as appropriate to the duration of your time in training (https://www.fom.ac.uk/wp-content/uploads/OMST-2022-Curriculum-Assessment-Strategy.pdf)</p> <p>In addition, you should provide evidence of CPD undertaken during that time as well as since.</p>
360° and multi-source feedback with reflection	<p>You must supply evidence of feedback from colleagues of all levels (peers, nursing, auxiliary staff, patients, management) completed at the time and which may be in the format of letters, references for posts applied for etc.</p> <p>Patient/client feedback is also expected (please see section above on "How much evidence to submit")</p>

Records of daily clinical practice and portfolios

Evidence of Occupational Medicine practice

Diaries or clinic lists for at least two separate months of each year over the period from which your evidence has been gathered, showing the volume of cases you have managed and the range of conditions and cases being addressed.

Reports to management

These must include cases of long-term sickness absence (at least eight cases), short-term sickness absence (at least eight), ill health retirement (at least six), pre-employment (at least four), occupational diseases or conditions (at least four), mental ill health including stress (at least four), significant workplace risks such as from chemical or physical hazards (at least two) and cases where health promotion advice has been given (at least four). You should also aim to include cases where advice relating to travel overseas has been given (at least four). Please note that more than one of these situations can be covered in any report, thus the total number of reports to be submitted may well be less than 44.

Evidence of advising on the application of relevant legislation should be included where appropriate. Compliance with ethical principles, data protection, processes for obtaining consent and those for maintaining confidentiality also needs to be demonstrated.

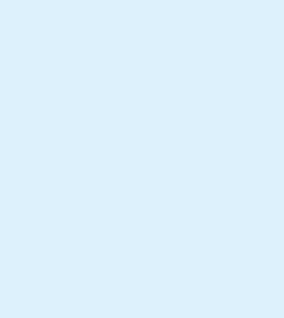
The reports submitted must include a variety of cases and medical conditions, including mental and physical, as well as cases of long and short term sickness absence, occupational disease, disability and those where advice on rehabilitation and on possible early retirement on ill health grounds have been given.

Reports and other evidence of carrying out pre-placement and in-work fitness to work assessments with appropriate advice on restrictions and adjustments must also be included.

Case histories	Case histories may be submitted as alternatives to reports to management, although should still include evidence of the advice given to management. At least eight would be expected, covering the range of situations indicated in the above paragraph covering reports to management.
Case Conferences	Evidence of your participation in case conferences, demonstrating regard for client consent and confidentiality, with reflection should be submitted.
Referral letters discussing patient handling	Please include at least four referrals you have made to other healthcare professionals e.g. to request a specialist opinion, to seek information about individuals from a healthcare professional who has already provided care or advice to them or to seek professional help on behalf of an individual.

Evidence of employment in posts and duties (including training posts)

CV	You must provide an up to date copy of your CV, which includes all the details listed in the guidance on our website .
Employment letters and contracts of employment	The information in these letters and contracts must match your CV. They will confirm the following: <ul style="list-style-type: none"> ● dates you were in post ● post title, grade, training ● type of employment: permanent, fixed term, or part time (including percentage of whole time equivalent)
Job descriptions	These must match the information in your CV. They will confirm the following:

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

Research

Research, publications and presentations

- Dissertation 'for purpose' based on an original research project or one submitted for a higher degree, on a medical subject or topic
- OR**
- Scientific papers published in a peer-reviewed journal (or a complex case written in a similar format)

CPD and CME

CPD record certificates, certificates of attendance, workshops and at local, national and international meetings or conferences

Details of CPD you have undertaken with relevance to Occupational Medicine, including certificates and reflection

Please include courses relevant to the curriculum - all courses you have attended in the broad fields of health, medicine, epidemiology and statistics, management, law and education that clearly relate to the organisation and delivery of occupational health services or the conduct of research and teaching. Relevant evidence could include certificates, course content and copies of any assessment of the course.

Please provide details of the events you have attended describing the content. Support this with documentary evidence of your attendance (CPD certificates etc)

CPD does not need to meet any specific numerical requirement – quality rather than quantity is important – but it is recommended that GMC standards for this are met.

See the FOM guidelines at <https://www.fom.ac.uk/revalidation-cpd-2/cpd>.

Teaching and training

Teaching and training

- At least four examples of presentations or teaching you have given to groups, with feedback and reflection
- Evidence of training you have undertaken in the supervision of other medical professionals, with reflection
- Multi-Source/360 feedback reports with reflection
- Undertaking relevant and appropriate amounts of CPD on a regular basis, including attendance at major conferences, with reflection (reflective diary)

AND AT LEAST TWO OF THE FOLLOWING:

- Evidence of your creating or arranging educational courses
- Letters of appreciation from educational centres or senior colleagues relating to your provision of teaching
- Evidence of your giving constructive feedback to others, such as to those who have given presentations or teaching sessions. This may include carrying out WBAs.
- Evidence of your mentoring others

- Evidence of your involvement in the interviewing or assessment of potential new colleagues
- Evidence of your carrying out Appraisals of or providing references for others

Health Surveillance

- Health Surveillance
- Evidence of your carrying out or having involvement in health surveillance and of evaluation of at least two client health surveillance programmes with reflection
- OR**
- Audit of, writing protocols/procedures for or evidence of the creation of at least two client health surveillance programmes

Health Promotion

- Health Promotion
- At least four reports to management which include mention of health promotion or health improvement, including recommendations for changes to lifestyle and encouragement to workers to gain access to suitable additional information or professional advice and/or support groups
- AND:**
- Preparation and dissemination of material you have created on the promotion of good health or prevention of ill health

OR

- At least two presentations or teaching to colleagues or workers on topics related to promotion of good health or prevention of ill health

OR

- A report on your assessment of the need for health promotion in a workplace and provision and evaluation of a health promotion programme with reflection

AND:

- CPD on health promotion topics
- Evidence of your recommending or advising on the use of stress risk assessment in the workplace
- Workplace-Based Assessments in which health promotion is included

Travel

Travel

- Evidence of your giving advice on overseas travel or advising those who have returned from overseas with medical conditions which may have arisen as a result of travel.

OR

- Writing a policy on travel or carrying out a relevant audit or relevant case histories or CBDs or undertaking or providing training or CPD in travel medicine

Section 2 - Safety and quality

Participation in audit, service improvement

Audits, reflections, service improvement and clinical governance meetings.

- Reports of at least two audits you have carried out with full discussion of standards used, how analysis of data collected led to recommendations for change, how these altered practice and repeat audit(s), with reflection. Publications based on audits you have carried out can, alternatively, be submitted

AND:

- At least two Standard Operating Procedures, policies or guidelines you have written or updated

AND:

- Evidence of your involvement in at least two service development or improvement projects with feedback or Workplace-Based Assessments, as well as reflection

OR

- Minutes of clinical governance or service improvement meetings including a record of your participation, with reflection – you should include evidence of at least one such meeting a year

AND:

- At least two written reports in which you refer to the use of guidelines

OR

- Investigations or reports of critical or significant incidents, with reflection

Safety

Health and safety

Please provide evidence to support awareness and following Health and Safety requirements.

This should be demonstrated by:

- Reference to health and safety matters in your reports to management

AND

- Reports on at least four workplace visits you have carried out, including describing workplace hazards (chemical, physical, biological and psycho-social), with reference to relevant legislation, risk assessment, relevant workplace investigations and measurements and recommendations for improved risk management

- Management of complex cases of occupational disease
- Reports on environmental impact assessments for two separate organisations you have carried out

AND EITHER

- Assessment of first aid arrangements in workplaces

OR

- Writing a first aid policy for at least two separate organisations

AND

- Declaration of health on your application form
- Attendance at appropriate courses

AND AT LEAST TWO OF THE FOLLOWING:

- Involvement in drug testing (including Medical Review Officer work) or writing a policy or guideline on this subject or a giving a presentation on it, with reflection
- Involvement in the investigation of and/or reporting of significant cases or critical incidents

- Involvement in managing or preventing infectious disease outbreaks
- Carrying out medical assessments for safety-critical jobs
- At least two presentations on other health and safety topics, with feedback and reflection
- Minutes of health and safety meetings you have participated in confirming your participation and reflection
- Standard Operating Procedures, policies or guidelines on health and safety topics you have written or updated

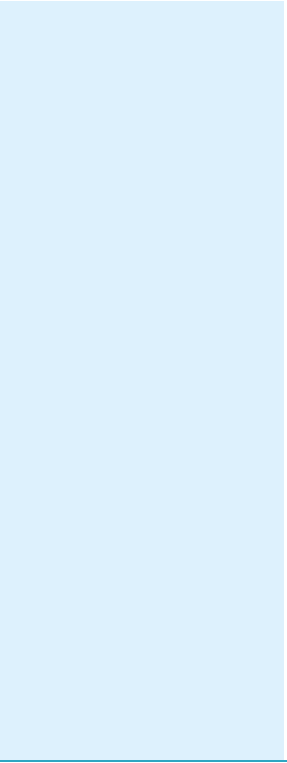
Safeguarding

Safeguarding

- Training in Safeguarding and/or Child Protection with details of course content and reflection

AND AT LEAST TWO OF THE FOLLOWING:

- Reports to management which mention actions taken to protect vulnerable individuals

- 
- Case conferences considering vulnerable individuals or safeguarding actions
 - Evidence of your participation in meetings which discuss these matters, with reflection
 - Communication with others regarding bullying and/or harassment
 - Communications with other healthcare professionals in order to protect vulnerable individuals
 - Writing or reviewing a policy on safeguarding
 - Workplace-Based Assessments of cases involving vulnerable individuals or safeguarding
 - Interventions to protect colleagues where violence may or has occurred
-

Section 3 - Communication, partnership and teamwork

Communication

Colleagues

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 from colleagues (examples of shared cases or “To whom it may concern letters” or testimonials)
- letters of correspondence between you and your colleagues, demonstrating collaboration over management of patient/employee care across multidisciplinary teams
- management activities –
- presentations
- copies of appraisals or references written for colleagues (these **must** be **anonymised** with relation to colleague data).

Patients/clients

Please provide information to support your communication with patients/clients, employees and managers.

This area could be demonstrated in a number of ways including:

- thank you letters and cards from clients
- letters from colleagues (examples of cases shared or “To whom it may concern letters” / testimonials)
- 360° feedback.

You should provide copies of case reports or letters as evidence of having obtained informed consent from patients or employees prior to undertaking any clinical activity

All evidence in this area **must** be **anonymised** for individual patient/client data.

Partnership and teamwork

Management and leadership experience, working in multidisciplinary teams and chairing meetings and leading projects

- Evidence of at least four meetings in which you participated in the development of the delivery of an Occupational Health service.

OR

- Evidence that you have managed and evaluated an Occupational Health clinic

AND EITHER:

- Evidence of working in a team e.g. minutes of at least two meetings confirming your participation, with reflection, reports or other written evidence of your interacting or working with other members of a team

OR

- At least two presentations to a team you work with including feedback and reflection

AND:

- Evidence of discussing or managing cases within a team (including multi-disciplinary teams), including case-based discussions
- Evidence of your management activities e.g. of leading a project, chairing meetings or interview panels, managing colleagues, managing or leading an Occupational Health contract, contributing to a business case or tender, contributing to a business case, doing a short training course in management (including financial and commercial activities) with details of course content and reflection
- Workplace-Based Assessments, including Multi-Source/360 feedback reports with reflection
- Appraisal documents (as referred to in Outcome 1)

AND

- Evidence of your carrying out Appraisals of or providing references for others

OR

- Evidence of your support or mentoring or supervision of peers, less experienced colleagues or students

Section 4 - Maintaining trust

Acting with honesty and integrity

Testimonials and letters from colleagues	<p>You may include “To whom it may concern letters”.</p> <p>All evidence in this area must be anonymised for individual patient/client data.</p>
Thank you letters, cards from colleagues and patients	<p>Please ensure that these are anonymised (for individual patient/client data).</p>
Complaints and responses to complaints	<p>Examples of at least two complaints, with written evidence of how they were addressed and resolved, with reflection</p> <p>This is to demonstrate how you handle complaints. Having a complaint made against you will not adversely influence your application.</p> <p>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.</p> <p>You may provide a reflective diary of how you would handle a hypothetical complaint.</p> <p>All evidence in this area must be anonymised for individual patient/client data.</p>

Other evidence from multi-source feedback, appraisals, workplace-based assessments, demonstration of respecting confidentiality in reports to management, seeking ethical approval for research, providing feedback or references to colleagues and written evidence of interactions between colleagues e.g. in e-mails or letters may also be submitted
