

# Specialty specific guidance on documents to be supplied in evidence for an application for entry onto the Specialist Register with a Certificate of Eligibility for Specialist Registration (CESR)

## Neurosurgery

This guidance is to help doctors who are applying for entry onto the Specialist Register with a CESR in Neurosurgery. You will also need to read the [Neurosurgery Curriculum documentation](#)

### Can I get advice before I submit my application?

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 Joint Committee on Surgical Training ([JCST](#)) for guidance **before** you submit an application or a reapplication.

### What is the indicative period of training for a Certificate of Completion of Training (CCT) in Neurosurgery?

The indicative period of training for a CCT in Neurosurgery is eight years and it is very unlikely that you would achieve the competencies required for a CCT in a shorter period of time.

The structure of the programme is an indicative two years in CoreTraining in ST1/2 posts followed by an indicative six years of speciality training (ST3-ST8).

At present, all trainees who have made a definitive choice to enter Neurosurgery will enter a “run-through” training programme, and will be able to focus upon achieving specialty specific. Those wishing to enter Neurosurgery from core surgical training posts will have to return to ST1 in Neurosurgery to gain competencies in Neurology and Neuro-intensive care, but will be expected to leapfrog intervening years before entering ST3/4.

This list is given for example purposes only and is not exhaustive – for a complete list refer to the [Neurosurgery Curriculum documentation](#).

### Submitting your evidence

Do not submit original documents.

All your copies, other than qualifications you’re getting authenticated **must** be accompanied by a proforma 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](#).

### How much evidence to submit

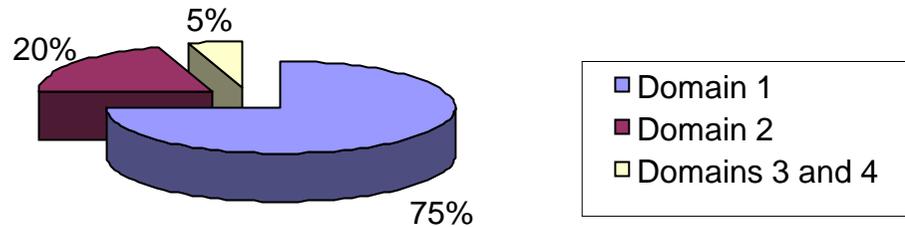
This guidance on documents to supply is not exhaustive and you may have alternative evidence. We recognise that you may not have all the evidence listed here and you may wish to delay submitting an application until you are able to gather it.

Your evidence **must** cover the knowledge, skills and qualifications to demonstrate the required competencies in all areas of the [Neurosurgery 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 it 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".)

### Evidence breakdown



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 that is more than five years old will be given less weight than more recent evidence, so you may not need to include it. 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.

### Unsuccessful applications or poor evidence

It is our experience that applications from doctors in the specialty of Neurosurgery are often submitted with inadequate or poor evidence in the following areas:

- Where an applicant fails to provide evidence that shows that their current breadth and depth of knowledge, skills and experience is equivalent to the requirements set out in the CCT curriculum. It is not enough to show that you have been trained/gained competencies in the past, but you also need to show that you are maintaining them
- Not strong enough evidence of current depth and breadth of knowledge where an applicant has not passed the intercollegiate examination. For example where there is evidence of knowledge in one particular area only and not across the totality of the specialty, or the evidence is not current and up to date.
- Log books are insufficient. For example there is not enough detail in the logbooks or the logbooks are poorly presented and badly organised. Your logbooks **must** include the age and sex of the patient, the procedure name and date, whether the procedure was elective or emergency, your involvement, and the outcome/any complication. You should also provide consolidation sheets/summary totals for the logbooks that you submit.

We strongly recommend that you closely match your experiences against the current curriculum and provide evidence of equivalence across all areas. We also strongly

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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

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><b>If you do not hold registration, you will need to have your primary medical qualification independently verified by ECFMG before we can grant you full registration with a licence to practise.</b></p> <p>You can find out more about <a href="#">primary source verification</a> on our website.</p> <p>You only need to get your primary medical qualification verified by ECFMG. The rest of your evidence should be verified in line with <a href="#">our guidance</a>.</p>
Specialist medical qualification(s)	<p>Please provide an <b>authenticated copy</b> of any specialist medical qualifications you hold.</p> <p>For College examinations the College may confirm details of any examinations you have undertaken.</p> <p>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.</p> <p>As well as showing that you have either a specialist medical qualification or training in order to be able to apply you <b>must</b> demonstrate knowledge to the standard of the curriculum.</p> <p>To demonstrate evidence of depth of knowledge you should provide a portfolio to demonstrate appropriate levels of knowledge in general surgery. You should bear in mind that you will be measured against the standards of a CCT. (The formal test of knowledge required by the curriculum is the Intercollegiate Fellowship Exam (ICB Examination). If you cannot demonstrate success in this exam then other supporting evidence of their knowledge <b>must</b> be very strong indeed). Other elements of the portfolio could include evidence of research, peer reviewed publications and presentations at national and international meetings, evidence of specialist qualifications or examination(s) passed for example College/Faculty exams.</p> <p>The following are examples of part of a portfolio to demonstrate knowledge- although it is unlikely that any one thing on their own would do this</p> <ul style="list-style-type: none"><li>• <b>pre ICB Examination versions of the Fellowship of the Royal College of Surgeons (FRCS)</b> -These will show a basic level of knowledge but not specialty specific or current.</li></ul>

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- **other examinations including overseas qualifications-** You will need to provide certification of success together with details of what the examination covers and to what level. The official curriculum/syllabus could demonstrate this
- **research-**As evidence of publication of the research you should include the first page setting out the scope and detailing your involvement.
- **postgraduate degree gained through research-**as evidence you should include original certificate or notarised copy
- **peer reviewed publications-**You should include the front page of each publication. The best evidence will be first name publications in high impact factor peer review journals of work relating to knowledge / skills normally achieved in the last year(s) of the CCT curriculum
- **presentations at national and international meetings** -You should include as evidence a programme detailing title of presentation, where presented and any feedback
- **presentations at National or International conferences** on knowledge/ skills normally achieved in the last year(s) of the CCT (or equivalent overseas) curriculum. This should be current
- **teaching** -As evidence you should include rotas, teaching materials, programmes of lectures, trainee feedback. Evidence of teaching may form part of the portfolio but only if it is obvious what level of knowledge it displays and that it covers all areas of the curriculum. The evidence will need to be comprehensive. For example participation (lead role) in training those undertaking CCT (or equivalent overseas) training at the final years of the CCT (or equivalent overseas) programme
- **acting as Examiner/Assessor/designing and developing examinations-** *This may form part of the portfolio if it is clear what level of knowledge it displays and that it covers all areas of the curriculum. The evidence will need to be comprehensive for example examiner for the ICB.*

Note the GMC expect you to list any failed attempts at examinations relevant to your specialty. Please list unsuccessful attempts at examinations (where you have not subsequently been successful) in the application form.

Curriculum or syllabus (if undertaken outside the UK)	<p>This should include the requirements of the qualification and <b>must</b> relate to the specialty in which you are applying. The curriculum or syllabus (including assessment methods) <b>must</b> be the one that was in place when you undertook your training.</p> <p>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.</p> <p>For qualifications, we will look to evaluate:</p> <ul style="list-style-type: none"> <li>• where the curriculum covers areas of the CCT curriculum</li> <li>• the complexity of the work undertaken</li> <li>• how examinations are evaluated or quality assured (external assessment).</li> </ul> <p>The JCST does not hold evidence relating to overseas training programmes and therefore you <b>must</b> supply these.</p>
Specialist registration outside the UK	<p>Please provide an <b>authenticated copy</b> of details of the registration requirements of that authority.</p> <p>This will demonstrate what is expected of a registrant by that authority and how your application for registration was evaluated.</p> <p>The JCST does not hold evidence relating to overseas training programmes and therefore you <b>must</b> supply these.</p>
Honours and prizes	<p>Please provide <b>copies</b> of certificates or letters showing what the prize or honour was for, including the selection and eligibility criteria and pool of eligible individuals.</p> <p>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.</p>
Other relevant qualifications and certificates	<p>Please provide <b>copies</b> of certificates.</p> <p>For example: degrees or diplomas in relevant areas such as management, business, IT, communication, education or law.</p>

## Assessments and appraisals

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## Appraisals and assessments

You should submit evidence of recent appraisals – you need to show that your practice is examined and that you use this as a tool for continuous development. The appraisals should also include a personal development plan (PDP). PDPs normally form part of your annual appraisal system and you should submit them with appraisal documentation. Appraisals completed retrospectively hold no value.

The workplace-based assessment (WBA) methods used in the curriculum are:

- Mini-PAT (peer assessment tool)
- Mini-CEX (mini clinical evaluation exercise)
- CBD (case-based discussion)
- Surgical DOPS (direct observation of procedural skills in surgery)
- PBA (procedure-based assessment)

WBAs should be sufficiently frequent to be able to demonstrate progress and should be undertaken with different assessors in different settings on a variety of patients. It is important for those who are not in training to provide details of assessment of the same competency from three assessors in order to triangulate the information. WBAs completed retrospectively will hold no weight.

You should provide WBAs, especially PBAs and CBDs, in the specified format below, for the main topics and procedures across the full breadth of the curriculum. The curriculum contains key topics, index procedures and other operations to guide you in what to cover. The CCT Guidelines for neurosurgery provide information.

It is very important that your PBAs are as meaningful as possible and therefore they should show evidence of feedback and guidance. They should include comments from your assessors and, where appropriate, demonstrate reflection by you. Block entries of 'satisfactory' are not acceptable.

You should order your WBAs as follows: grouped together by type of WBA (eg. PBA, CBD) and within that by procedure (eg. all the PBAs for the same procedure should be together). You should also provide an index of the WBAs.

The above tools are available for those not in training to use.

Alternatively, if the evidence of your recent competence has been gained within a system where the assessments above do not exist, you will still need to 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). Where no formal appraisal or assessment forms are available you must provide information on the method of career review or progression. 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 must provide information on the method of assessment used.

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RITAs, ARCPs and training assessments	<p>Formal records of assessment have been in place in the UK since 1996 (for posts of Registrar, Specialist Registrar, and Specialty Registrar). If you have undertaken training in the UK in these grades you should provide a <b>copy</b> 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.</p> <p>If you have undertaken training outside the UK you <b>must</b> provide evidence of formal periodic assessment during your training. This evidence <b>must</b> 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 <b>must</b> provide the curriculum to demonstrate how you were assessed. A detailed letter of verification from an educational supervisor would satisfy this requirement.</p> <p>If that training was recognised by relevant authorities outside the UK please provide evidence and recognition standards.</p> <p>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.</p>
360° and multi-source feedback	You may wish to supply evidence of feedback from colleagues of all levels (peers, nursing, auxiliary staff, patients, management) completed at the time and may be in the format of letters, references for posts applied for etc.
Awards and discretionary points letters	You <b>must</b> provide copies of certificates and letters.
Personal development plans (PDP)	<p>For details of what to include please see <a href="#">NHS appraisal information</a></p> <p>You <b>must</b> 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.</p>

## 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.

Where you have, for a substantial period of time, worked in a specialised area, you should submit evidence that at one stage in your career you achieved the requirements and competencies of the curriculum for your specialty and that have 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	<p>Photocopies of operating lists and theatre record books are not satisfactory evidence of procedures. If you did not complete a logbook at the time you undertook the procedures, you should create a logbook from the information you have. It should contain the following information:</p> <ul style="list-style-type: none"><li>• only procedures that you were personally involved in</li><li>• age and gender</li><li>• date of the procedure</li><li>• full name of the procedure</li><li>• your role in the procedure (assisted, performed personally, performed under direct supervision of someone more senior, supervised a junior)</li><li>• any critical incidents</li><li>• name of the hospital or clinic where procedure was performed</li><li>• outcomes data.</li></ul> <p>It is important that these cover the full range of the curriculum demonstrating the breadth and depth of the specialty. This may mean that you have to go back further than 5 years.</p> <p>All evidence in this area <b>must</b> be <b>anonymised</b> for individual patient data.</p> <p><b>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.</b></p>
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<p>Consolidation, cumulative data sheets, summary lists and annual caseload statistics</p>	<p>You also need to provide consolidation sheets. If you do not provide these in the format described then it will be very difficult to assess your skills and experience. This could lead to your application being unsuccessful. The logbook and consolidation sheets need to be set out in the e-logbook format and <b><u>must include a single consolidation report, listed by operation group of all of the procedures you have been involved with during the last six years.</u></b></p> <p>In addition,</p> <ul style="list-style-type: none"> <li>• a consolidation report for the same period showing the total numbers for the SAC indicative procedures,</li> <li>• cumulative totals for the operation groups for your specialty for each six- or 12-month period. This will help us to see your progression over the six years into more complex cases and more independent operating; and</li> <li>• your experience over the rest of your career (split into UK/overseas if necessary).</li> </ul> <p>All consolidation sheets need to be categorized by your involvement, e.g. assisting, you as the surgeon, assisted by a trainer, etc.</p> <p>All evidence in this area must be <b>anonymised</b> for individual patient data.</p>
<p>Medical reports</p>	<p>These are not required for Neurosurgery applications.</p>
<p>Case histories</p>	<p>These are not required for Neurosurgery applications.</p>

Referral letters discussing patient handling	<p>You need only to provide two or three examples of your referral letters. This may include examples of letters:</p> <ul style="list-style-type: none"> <li>• requesting a second opinion</li> <li>• advising clinical colleagues or answering particular questions regarding patient management</li> <li>• from clinical colleagues regarding your involvement in patient management</li> </ul> <p>You can use these to demonstrate your:</p> <ul style="list-style-type: none"> <li>• relationship with colleagues in other disciplines</li> <li>• handling of patient paperwork</li> <li>• recognition of the limits of your professional competence</li> <li>• respect and protection of confidential information</li> </ul> <p>All evidence in this area must be <b>anonymised</b> for individual patient data.</p>
Patient lists	These are not required for Neurosurgery applications.
Departmental (or trust) workload statistics and annual caseload statistics	<p>You can use these to demonstrate:</p> <ul style="list-style-type: none"> <li>• the size of the hospital in which you work</li> <li>• the volume of work undertaken within your trust and the percentage that you undertake</li> <li>• the range of work that you undertake and that is undertaken within your trust</li> <li>• triangulation with logbook information</li> </ul>
Rotas, timetables and job plans	<p>Where you have undertaken a number of roles provide details for each post or role. You can use these documents to demonstrate:</p> <ul style="list-style-type: none"> <li>• details of clinical and non-clinical duties you undertake</li> <li>• your on-call commitment</li> <li>• your participation in meetings and teaching</li> <li>• triangulation with logbook information.</li> </ul>

Courses relevant to curriculum	<ul style="list-style-type: none"> <li>• <b>Advanced Trauma Life Support (ATLS)</b></li> <li>• <b>Care of the Critically Ill Surgical Patient (CCrISP)</b></li> <li>• Professional association instructional courses and conferences</li> <li>• Professional development courses</li> <li>• Management in the NHS</li> <li>• Training the Trainers (or similar)</li> <li>• Research methodologies</li> <li>• Good Clinical Practice (GCP)</li> </ul>
Portfolios (electronic or revalidation)	Do not submit your whole portfolio. You need to separate the evidence in it and submit that 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 <b>must</b> match your CV. They will confirm the following: <ul style="list-style-type: none"><li>• dates you were in post</li><li>• post title, grade, training</li><li>• type of employment: permanent, fixed term, or part time (including percentage of whole time equivalent)</li></ul>
Job descriptions	These <b>must</b> match the information in your CV. They will confirm the following: <ul style="list-style-type: none"><li>• your position within the structure of your department</li><li>• your post title</li><li>• your clinical and non clinical commitment</li><li>• your involvement in teaching or training.</li></ul>
Job plans	Where you have undertaken a number of roles, provide details for each post or role. You can use these documents to demonstrate: <ul style="list-style-type: none"><li>• the main duties and responsibilities of the post</li><li>• your out of hours responsibilities, including rota commitments</li><li>• that you have covered for colleagues' periods of leave</li><li>• any professional supervision and management of junior medical staff that you have undertaken</li><li>• your responsibilities for carrying out teaching, examination and accreditation duties</li><li>• your contribution to postgraduate and continuing medical education activity, locally and nationally</li><li>• any responsibilities you had that relate to a special interest</li><li>• requirements to participate in medical audit and in continuing medical education</li><li>• your involvement in research</li><li>• your managerial, including budgetary, responsibilities where appropriate</li><li>• your participation in administration and management duties.</li></ul>

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## Research, publications and presentations

Research papers, grants, patent designs	<p>A period in research is required by the curriculum. Please refer to <a href="#">the Neurosurgery Curriculum documentation</a> for details.</p> <p>Please include any research relevant to your current practice.</p> <p>If the research is published - please submit the first page of the published paper.</p> <p>If the research is not published - please provide a summary or abstract of the research.</p> <p>Colleges may undertake web searches to check the information you provide.</p> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"><li>• the types and complexity of cases you are involved in</li><li>• triangulation with logbook information</li><li>• working with colleagues (where research is joint or multi disciplinary)</li><li>• Continuing Professional Development (CPD).</li></ul> <p>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.</p>
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<p>Publications within specialty field</p>	<p>Evidence of publications and presentations is required by the curriculum</p> <p>Include a copy of the front page of each publication.</p> <p>More weight is given where:</p> <ul style="list-style-type: none"> <li>• the applicant is first author</li> <li>• the publication has a high impact factor.</li> </ul> <p>You <b>must</b> not change the listing of the authors (the order in which the authors are listed) in papers where there is more than one author.</p> <p>Colleges may undertake web searches to check the information you provide.</p> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"> <li>• the types and complexity of cases you are involved in</li> <li>• triangulation with logbook information</li> <li>• working with colleagues (where publications are joint or multi disciplinary)</li> <li>• CPD.</li> </ul> <p>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:</p>
<p>Presentations, poster presentations</p>	<p>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.</p> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"> <li>• the types and complexity of cases you are involved in</li> <li>• triangulation with logbook information</li> <li>• CPD</li> <li>• teaching and training.</li> </ul> <p>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.</p>

## CPD and CME

<p>CPD record certificates, certificates of attendance, workshops and at local, national and international meetings or conferences</p>	<p>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.</p> <p>Please provide details of the events you have attended describing the content. Support this with documentary evidence of your attendance (CPD certificates etc).</p> <p>See the JCST guidelines at <a href="http://jcst.org">jcst.org</a>.</p>
<p>CPD registration points from UK Medical Royal College (or equivalent body overseas)</p>	<p>Please provide evidence of registration within a formal system. Royal Colleges or Faculties may confirm attainment of their requirements.</p>
<p>Membership of professional bodies and organisations</p>	<p>List the following for your current membership of professional bodies and organisations. Provide documentary evidence showing membership information:</p> <ul style="list-style-type: none"><li>• organisation name</li><li>• date of joining</li><li>• status of membership (member, associate etc)</li><li>• how membership is achieved (evaluation, examination, is membership restricted or open to all?)</li></ul> <p>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.</p> <p>See the JCST guidelines at <a href="http://www.jsct.org">www.jsct.org</a>.</p>

## Teaching and training

Teaching timetables	<p>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.</p> <p>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.</p>
Lectures	<p>Please include evidence showing the audience and topics covered, such as posters advertising event, educational timetable from trust education centre, letter from education centre indicating your involvement in specialty trainee formal education programme.</p> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"><li>• the types and complexity of cases you are involved in</li><li>• triangulation with logbook information</li><li>• CPD</li><li>• teaching and training</li><li>• communication skills.</li></ul> <p>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.</p>

Feedback or evaluation forms from those taught	<p>Please provide copies of feedback from teaching events you have participated in.</p> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"> <li>• the types and complexity of cases you are involved in</li> <li>• triangulation with logbook information</li> <li>• CPD</li> <li>• teaching and training</li> <li>• leadership</li> <li>• relationships with colleagues</li> <li>• communication skills.</li> </ul> <p>All evidence in this area <b>must</b> be <b>anonymised</b> for individual patient data.</p>
Letters from colleagues	<p>You can use copies of letters from colleagues to demonstrate similar information to feedback forms (see above).</p> <p>All evidence in this area <b>must</b> be <b>anonymised</b> for individual patient data.</p>
Attendance at teaching or appraisal courses	<p>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.</p>

<p>Participation in assessment or appraisal and appointments processes</p>	<p>You may provide the following types of evidence to support this area:</p> <ul style="list-style-type: none"><li>• copies of invitations to appraisals or assessments including attendance at appraisal/assessment courses</li><li>• evidence of participation in the Deanery ARCP or RITA processes</li><li>• evidence of participation in appointments for trainees (including invitations to participate and interview panel information, including attendance at interview and appointment related courses).</li></ul> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"><li>• contribution to postgraduate and continuing medical education activity, locally and nationally</li><li>• any responsibilities which relate to a special interest</li><li>• participation in administration, management duties</li><li>• participation in teaching and training</li><li>• communication, partnership and teamwork</li><li>• relationships with colleagues (including giving feedback)</li><li>• leadership.</li></ul>
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## Domain 2 – Safety and quality

### Participation in audit, service improvement

Audits undertaken by applicant	<p>You should provide evidence of the five stages of the audit process:</p> <ol style="list-style-type: none"><li>1. Definition of criteria and standards</li><li>2. Data collection</li><li>3. Assessment of performance against criteria and standards</li><li>4. Identification of changes (alterations to practice)</li><li>5. Re-evaluation</li></ol> <p>Evidence you could supply includes:</p> <ul style="list-style-type: none"><li>• audit reports (collections of data alone are not considered as a full clinical audit)</li><li>• publications</li><li>• submissions to ethics committee (not satisfactory alone)</li><li>• presentations of audit work (see above for details required for presentations)</li><li>• letter from audit or clinical governance lead confirming participation in audit or governance activities</li><li>• guidelines produced to reflect lessons learned within audit</li><li>• notes from self-reflective diaries.</li></ul> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"><li>• the types and complexity of cases you are involved in</li><li>• triangulation with logbook information CPD</li><li>• communication, partnership and teamwork</li><li>• relationships with colleagues, patients</li><li>• leadership</li><li>• multi disciplinary working.</li></ul>
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<p>Reflective diaries</p>	<p>You can use this document to demonstrate</p> <ul style="list-style-type: none"> <li>• triangulation with logbooks</li> <li>• relationships with colleagues</li> <li>• your recognition of the limits of your professional competence</li> <li>• handling of critical incidents or complaints</li> <li>• how you have changed your practice in the light of experiences (part of audit)</li> </ul> <p>As this evidence is self produced for its content to be given weight it must be supported or triangulated by other evidence.</p>
<p>Service Improvement and clinical governance meetings</p>	<p>The requirement for this it is interwoven through out the curriculum.</p> <p>This area could be demonstrated in a number of ways including:</p> <ul style="list-style-type: none"> <li>• invitations to attend meetings</li> <li>• minutes of meetings demonstrating your attendance and participation in the meeting.</li> </ul> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"> <li>• communication, partnership and teamwork</li> <li>• relationships with colleagues</li> <li>• leadership</li> <li>• multi disciplinary working</li> <li>• participation in audit or clinical governance.</li> </ul> <p>All evidence in this area <b>must</b> be <b>anonymised</b> for individual patient data.</p>

## Safety

Health and safety	<p>Please provide evidence to support awareness and following Health and Safety requirements.</p> <p>This can be demonstrated by:</p> <ul style="list-style-type: none"><li>• declaration of health on your application form</li><li>• attendance at appropriate course</li><li>• involvement in infection control (membership of committees etc)</li><li>• logbook information on infections</li><li>• audit on infections and subsequent changes in activity.</li></ul>
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## Domain 3 – Communication, partnership and teamwork

### Communication

Colleagues	<p>Please provide evidence to support your communication with colleagues, both within your immediate team and the wider team (including non clinical).</p> <p>This can be demonstrated by:</p> <ul style="list-style-type: none"><li>• letters from colleagues (examples of shared cases or “To whom it may concern letters” or testimonials)</li><li>• letters of correspondence between you and your colleagues, demonstrating collaboration over management of patient care across multidisciplinary teams</li><li>• management – including organising staff rotas</li><li>• presentations</li><li>• copies of appraisals or references written for colleagues (these <b>must</b> be <b>anonymised</b> with relation to colleague data).</li></ul> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"><li>• communication, partnership and teamwork</li><li>• relationships with colleagues</li><li>• leadership</li><li>• multi disciplinary working</li><li>• participation in directorate and management meetings</li><li>• honesty and objectivity.</li></ul>
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Patients	<p>This area could be demonstrated in a number of ways including:</p> <ul style="list-style-type: none"><li>• thank you letters and cards from patients</li><li>• letters from colleagues (examples of cases shared or "To whom it may concern letters" / testimonials)</li><li>• complaints and responses to complaints.</li></ul> <p>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. <b>You must anonymise colleague information from this evidence.</b></p> <ul style="list-style-type: none"><li>• 360° feedback.</li></ul> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"><li>• communication</li><li>• relationships with patients</li><li>• honesty and integrity</li><li>• protecting patient confidentiality.</li></ul> <p>All evidence in this area <b>must</b> be <b>anonymised</b> for individual patient data.</p>
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## Partnership and teamwork

Working in multidisciplinary teams	<p>This area could be demonstrated in a number of ways including:</p> <ul style="list-style-type: none"><li>• invitations to attend meetings</li><li>• minutes of meetings demonstrating your attendance and participation in the meeting</li><li>• job plans which indicate this as a duty</li><li>• appraisals which include this information.</li></ul> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"><li>• communication, partnership and teamwork</li><li>• relationships with colleagues</li><li>• leadership</li><li>• multi disciplinary working.</li></ul> <p>All evidence in this area <b>must</b> be <b>anonymised</b> for individual patient data.</p>
Management and leadership experience	<p>The requirement for this it is interwoven through out the curriculum.</p> <p>This area could be demonstrated in a number of ways including:</p> <ul style="list-style-type: none"><li>• invitations to attend meetings</li><li>• minutes of meetings demonstrating your attendance and participation in the meeting</li><li>• job plans which indicate this as a duty</li><li>• appraisals which include this information.</li></ul> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"><li>• communication, partnership and teamwork</li><li>• relationships with colleagues</li><li>• leadership</li><li>• management skills.</li></ul> <p>All evidence in this area <b>must</b> be <b>anonymised</b> for individual patient data.</p>

Chairing meetings and leading projects

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

- 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
- project reports
- letters from colleagues
- publications or presentations.

You can use these documents to demonstrate:

- communication, partnership and teamwork
- relationships with colleagues
- leadership
- multi disciplinary working
- participation in directorate and management meetings
- CPD.

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.

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

## Domain 4 – Maintaining trust

### Acting with honesty and integrity

Honesty and integrity	You can demonstrate this with: <ul style="list-style-type: none"><li>• the declarations on your application form</li><li>• statements from your referees</li><li>• appraisal forms</li><li>• having no restrictions on your registration (UK based doctors)</li><li>• Certificate of Good Standing (overseas based doctors).</li></ul>
Equality and human rights (including disability, human rights, race, religion and ethnicity awareness and equal opportunities)	You can demonstrate this with: <ul style="list-style-type: none"><li>• evidence of attendance at relevant courses (please provide details of course content)</li><li>• feedback from patients and colleagues</li><li>• statements from your referees</li><li>• testimonials.</li></ul>
Data protection	You can demonstrate this with: <ul style="list-style-type: none"><li>• attendance at relevant courses (please provide details of course content)</li><li>• feedback from patients and colleagues</li><li>• your application and evidence being appropriately <b>anonymised</b>.</li></ul>

## Relationships with patients

Testimonials and letters from colleagues	You may include "To whom it may concern letters". All evidence in this area <b>must</b> be <b>anonymised</b> for individual patient data.
Thank you letters, cards from colleagues and patients	Please ensure that these are <b>anonymised</b> (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 <b>must</b> be <b>anonymised</b> for individual patient data.