Application guidance to pilot a new run through or uncoupled training pathway

To be used with the application form for a new training pathway pilot.

Introduction

1. Specialty curricula must specify the training pathways which doctors may follow to enter the GMC specialist register;
   - A run through training pathway guarantees that doctors, after a single competitive selection process and satisfactory progress, will receive training covering the entire specialty curriculum.
   - Uncoupled training pathways require a second stage of competitive recruitment following the first two or three years of ‘core’ training in order to progress to higher specialty training.

2. Any organisation may make a proposal for the introduction of a new run through or uncoupled training pathway.

3. Before approval to introduce a new pathway will be granted, it must be piloted for an agreed period in order to assess its impact and to plan the transition. The following general principles apply to all training pathway pilots:
   - They are to be conducted in parallel with the existing uncoupled / run through training programme.
   - The indicative duration of training will remain the same.
   - The pilot training programme will remain the same as the existing training programme in content and assessment (i.e. no changes to curricula competences or outcomes).
   - Any affected curricula must be amended to include reference to the pilot training pathway. For instance, any higher specialty curricula that currently accept the ‘core’ training (e.g. CT1 and CT2) as an entry route should be updated to accept the early years of a pilot run through programme (e.g. ST1 and ST2).
Evidence to support approval of piloting a new training pathway

4. To apply for approval to set up a pilot, the following information must be provided on the application form:

- **The rationale for proposing the new training pathway.** The reason or objective of the training pathway pilot must be clear and measurable. The most common reason for a run through pilot is that a specialty cannot recruit or retain enough trainees. In this case the success of the pilot might be measured by an increase in recruitment numbers to the specialty over several years.

- **Confirmation that the pilot will be run in parallel with the already established training pathway and that the content of the programme and indicative training time will be the same.** Any deviation from this would require a curriculum and/or legislative change and would not be processed via this application route.

- **Evidence of support for the new training pathway from the lead Royal College or Faculty** for the specialty (if the application is from a Royal College or Faculty, their support can be assumed).

- **A list of deaneries/HEE local offices intending to participate in the pilot and recruit to the training programmes following the new pilot pathway.** There is no pre-defined number of how many deaneries/local offices need to run the pilot, but it is recommended that there will be more than one in order to provide evidence that, if approved on a permanent basis, the pathway will be deliverable in other sites.

- **Evidence of support for the new training pathway from deaneries/local offices via the Lead Dean for the specialty,** including confirmation they are prepared to manage doctors in training following the new training pathway in addition to the existing training routes.

- **Details of how long the proposed pilot would last.** This should be sufficient for a full evaluation of the impact of the pilot to be demonstrated, including an assessment of doctors’ progression beyond the early years or core period of training. We recommend evaluations are submitted to the GMC for assessment at the start of the academic year in which the pilot is due to end, to allow time for assessment and any changes to recruitment processes. The pilot end date should also factor in enough time for the GMC to consider the evaluation and give its
approval before the next cohort are recruited, in order to ensure a seamless transition.

- **A list of any other specialty curricula that will need to be updated.** All specialties that accept the core training programme as an entry route into higher specialty training should be updated to accept the early years of a pilot run through training pathway. Please provide evidence that all lead colleges responsible for these specialties are aware of the proposed changes and intend to amend their curricula if the request to run a pilot is approved. This will enable doctors in training who choose to change from the pilot pathway onto an uncoupled pathway to remain eligible for a CCT rather than CESR (CP).

- **Indicate whether it is intended to continue to accept both training pathways on full approval or move to only the new approach.** Please also indicate whether those currently in training will be permitted or required to move onto the new training pathway, if approved, and provide a transition plan of how this will happen.

- **If the intention is to run the new pathway alongside the current one, please provide information outlining how fairness and parity between the two will be managed,** including ensuring availability of places in higher specialty training for doctors following the uncoupled pathway, and the use of assessment hurdles at the equivalent stage of training for those following either route.

- **Outline any effect on doctors’ progression,** for example moving into the higher training grades if a college exam or other assessment hurdle is a pre-requisite. Where an uncoupled training pathway requires college examinations as an entry requirement for ST3+ (or to exit core training) please clarify if doctors in run through training are permitted to continue beyond early years training whilst they re-sit examinations, or if they would need to have their training at ST2 extended, for example, until they pass the exam.

- **Detail how the pilot will be evaluated and when it will be reported back to the GMC.** It should be clear what we will expect to receive and when; and how this will demonstrate the success of the pilot. Unless otherwise inappropriate, updates should also be provided in the Annual Specialty Report.

- **Outline a communications plan for doctors in training who may be affected by the changes,** including those recruited to a pilot programme and those who are currently in training. There should be a description of how and when they will be contacted to ensure they are aware of the new training pathway and who they should go to for further help or information.
An equality and diversity analysis and or evidence that the applicant has considered the impact of the pilot on people who possess one or more of the nine protected characteristics under the Equality Act 2010.

Submitting your application

Once you have completed the application form and gathered the supporting evidence, you should submit it using a new service request in GMC Connect, the GMC’s secure portal. Please contact us at quality@gmc-uk.org if you need to set up a GMC Connect account. You will need access to the Education user group to be able to submit new training pathway pilot applications.

You should select the type ‘Curriculum Approval’ and sub type ‘Run through training’ when submitting your request in GMC Connect:

Assessment and approval of the pilot

5. The GMC will:

- Evaluate your application and issue a decision within 15 working days.
- If the pilot is approved, publish details of the pilot and amended curricula on its website.

6. On receipt of confirmation of GMC approval, the applicant will:

- Inform deaneries/local officers intending to take part in the pilot that it has been approved and remind them to apply for approval of programmes prior to commencing recruitment.
- Inform other colleges and faculties whose training pathways are affected by the pilot that it has been approved and remind them to submit their curricula changes before the pilot begins.

- Produce clear guidance for those considering entering the specialty, for those already in the core training and for those recruited to a pilot run through programme. An explanation of how they are impacted during and after the pilot must be clearly articulated and readily available.

**Establishing new pilot programmes**

7. If a training pathway pilot is approved, appropriate programme approval will need to be sought before recruitment can take place. Run through programmes have separate approval from uncoupled programmes.

8. The college may provide overarching support for all new pilot programmes so that separate support letters are not required for each request.

**Doctors recruited to one pathway who choose to move to a different pathway**

9. In order for a doctor in training to be awarded a CCT they must have followed an approved training pathway for the duration of their training. If part of their training was completed in non-approved posts then they will be awarded a CESR (CP).

10. A doctor appointed to a run through programme who chooses to transfer to another uncoupled higher specialty after completion of the early years training will remain eligible for a CCT if:

   - They successfully achieve the competencies and assessments of the early years curriculum.

   - The specialty curriculum they transfer to states that the early years of run through training is acceptable for entry to higher training. If the curriculum does not include this statement then the doctor may only be eligible for CESR (CP).

11. Full details about CCT, CESR (CP) and other routes to the GMC Specialist and GP registers are available via the [GMC website](http://www.gmc-uk.org).
Evaluation of training pathway pilots

12. Organisations seeking approval for a pilot pathway to be fully adopted should evaluate the pilot against its stated aims and identify any unanticipated benefits or concerns. We recommend your evaluation includes the following:

- **Proposal** - Please outline your proposed plans for moving forward with the new pathway following the pilot, including whether you will be seeking approval for it on a permanent basis and whether it will be offered alongside or instead of the current format of training programme. Please outline which deaneries/local offices have indicated that they intend to offer the new programme if it is available and whether they intend to also offer the original programme.

- **Rationale** - As part of your initial submission to the GMC, you were asked to explain your rationale for piloting the new training pathway. In your evaluation, please provide a summary of whether you feel the objectives have been achieved and are likely to be sustainable. Please outline any unanticipated benefits or impacts identified through the pilot and how these might be mitigated if necessary.

- **Evidence of support from the college or faculty responsible for developing the training curriculum** – if the pilot has not been proposed by the college or faculty, please submit a letter of support from the organisation responsible for developing the curriculum.

- **Evidence of support from deaneries and local offices (via the Lead Dean)** – Please provide a letter of support for implementation of your proposal from the Lead Dean.

- **Evidence of support from the colleges or faculties responsible for developing associated specialty curricula** - Please provide evidence that the bodies responsible for other specialties that may be affected by the introduction of run-through training, such as those who accept the same core training as an entry route into their higher specialty training, are aware of the approval and the impact of not updating their curriculum to accept the early years of run through training in the specialty as equivalent to the core training programme. An update of the curriculum in this regard will enable a doctor to remain eligible for CCT (rather than CESR CP) if they decide to change programme at any stage.

- **Evidence of engagement and feedback from doctors in training** - Please provide evidence of formal consultation with doctors in training appointed into the new training pathway and a summary of their responses. Please explain your plan for how any challenges or criticisms will be addressed.
Evidence of engagement and feedback from trainers - Please provide evidence of feedback from trainers who have been involved in the delivery of the new training pathway. This feedback could be used as supporting evidence of the deliverability of your proposed roll out, any impacts to the assessment system or quality of training delivered.

Equality and diversity impact assessment - Please provide an evaluation of the impact the new training pathway has had or is likely to have on doctors who share protected characteristics. Have certain groups of doctors been affected or performed differently in the pilot programme compared to those in the established programme? Has the introduction of the new training pathway changed or is likely to change the demographic make-up of the specialty?

Impact on recruitment and retention - Please provide evidence of the impact the training pathway has had on recruitment and retention to your specialty. You may also consider any impact the introduction of the training pathway has had on recruitment and retention in other associated specialties.

Impact on performance or progression of doctors in training - Please provide evidence to show any differences in how doctors in training have performed and progressed in the new training pathway compared to those in the established route. Suggestions for possible measures are:

- Application ratios or fill rates at ST3 or above
- WPBA outcome data
- ARCP outcome data
- Exam pass rate data
- Attrition rates and analysis of reason for attrition
- Variation in out of programme applications

Approving the training pathway on a permanent basis

13. The GMC will consider the evaluation and justification for the permanence of the pilot and make a decision.

14. If the decision is to reject the application, then the pilot will cease following an agreed cessation.

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15. If the decision is to approve the application, the GMC will:

- Inform the lead college, and other colleges managing curricula that have been updated during the pilot, that the pilot training pathway has received full approval.
- Inform deaneries/local offices that the new training pathway has been given full approval and that they can opt to establish a training programme if they have not been part of the pilot.
- Remove reference to the pilot from its website.

**Ceasing the training pathway pilot**

16. If you wish to cease the pilot at any point, including at the original pilot end date, you will need to provide us with the proposed date for cessation, a rationale for this decision and include support/endorsement from the lead college and Lead Dean.

17. Include with your request details of the changes that will need to be made to your curricula to reverse the pilot approval. Any other colleges or curricula what have been changed their curricula to include the pilot pathway will need to be notified of the cessation of the pilot and submit a request for their curricula change to be reversed.

18. It will not be possible to cease the pilot whilst there are doctors in training on the pilot pathway, as such there will need to be a transition plan to:

- Move doctors from a pilot training programme onto a corresponding training programme, or;
- To stop recruitment to the pilot pathway and wind down the approved programmes over a number of years.

19. Before removing programme approval and agreeing to stop the pilot, the GMC will require confirmation from every participating deanery/local office that there are no doctors in training remaining on the pilot programmes.

20. Once the GMC have confirmed the cessation date for the pilot we will:

- Inform the organisation applying to stop the pilot that it has been approved and agree the date and approach.
Inform all colleges and faculties who updated their curricula to recognise the pilot pathway that the pilot has been stopped, and advise of the steps to reverse the curricula change.

Inform deaneries/local offices that the pilot has ceased.

On the appropriate date, remove details of the pilot and the update all amended curricula on its website.

**Contact us**

If you have any questions about this process please email quality@gmc-uk.org