FREQUENTLY ASKED QUESTIONS
USING THE ACCREDITATION OF TRANSFERABLE COMPETENCY FRAMEWORK (ATCF) FOR TRANSFER INTO GENERAL PRACTICE SPECIALTY TRAINING (GPST)

Q1 I have been working in my current specialty for nearly three years. Can I count 12 months experience for general practice training?

A1 No. The maximum amount of time that can be accredited is 6 months irrespective of how long you have been in your current training programme.

Q2 Why is the ATC limited to 6 months?

A2 The amount of time that can be used for ACTF into GP is limited to no more than six months to reflect the shorter duration of the GPST programmes which are normally three or four years whole time equivalent (WTE).

Q3 I am currently in a training programme in Australia and will be applying for general practice specialty training. Can I count any of my experience towards my GPST? Can I use the ATC system to accredit experience gained in training programmes outside the UK?

A3 No. Accreditation of transferrable competencies only allows trainees to transfer from one UK approved specialty training programme to another.

Q4 I am currently in my first year as a GPST in a four year training programme and would like to use the ATC route to reduce my training time. Am I eligible?

A4 No. ATC allows UK trainees to transfer between specialties moving from training approved for one CCT programme to that approved for a different CCT. You cannot use it to move from one GP training programme into another one.

Q5 If I have completed some time in GP and apply to move region, necessitating starting the training programme again, can I use the ATC System?

A5 No. ATCF cannot be used to transfer within specialty or change region.

Q6 I am a core medicine trainee in the first year of my programme. If I receive an Outcome 2 for my exit ARCP will I be eligible for a shortened programme?

A6 No. Only trainees who have ARCP Outcome 1 at their Exit ARCP are eligible to be considered for a shortened programme. Any trainee having any other Outcome will be required to do the full training programme.

Q6a I have completed two years as a psychiatry trainee but resigned and I am currently working abroad. I am keen to count my psychiatry experience towards a shortened programme, am I able to do this?
No. You must currently be in an approved specialty training programme and hold a National Training Number (NTN). Any trainee who is not in possession of a National Training Number will be required to complete the full programme.

Can I use documented experience and competencies gained during LAS/LAT rotations or as a specialty doctor in applying for ATC and if not why not.

No as above you need to be in an approved specialty training experience the correct route for recognition for time as LAS/LAT would be the CESR/CEGPR which is unaffected by the ATCF.

If I apply for GP training and pass recruitment does that make me automatically eligible for a shortened programme?

Yes subject to conditions. If you are successful in GP recruitment, you are currently in a specialty training programme and curriculum approved for ATCF and you have declared your intent to transfer into GP then you are eligible for a shortened GP programme subject to local capacity and programme availability AND satisfactory progress in the final ARCP in your exiting specialty.

I intend to apply for general practice training but I am not sure I wish to go for the ATC route. Can I apply for this after I have the results of GP recruitment?

No. You must indicate at the time of applying for general practice specialty training that you are interested in following the ATC route. A retrospective application cannot be accepted.

If I obtain an Outcome 1 from my final ARCP in the transferring specialty programme, pass general practice recruitment but get an unsatisfactory outcome in my first year in GP recruitment, am I still eligible for a shortened programme?

No. If you are successful at your exiting ARCP and GP recruitment you are eligible to start a shortened programme. However, if you fail to demonstrate satisfactory progress in your first gateway ARCP in GP you are likely to receive an outcome 2 or 3 and would be eligible for targeted training or additional time. The period of additional training will be determined by your educational needs and the ARCP recommendations.

If I pass GPST recruitment and am considered eligible for ATC and have an Outcome 1 at the end of my first year of GP training, will I automatically get a shortened programme?

While you may be eligible for a shortened programme it does not guarantee that it will be possible to give you one in your LETB/Region. It will depend on the availability of the posts and the ability to give you a balanced educational programme.

Do I have to go through the full general practice specialty recruitment process even though I have already been selected for my current specialty?

Yes. All applicants using the ATC route into GP specialty training programmes must be successful in the GP recruitment and selection process for the current year.

If I am successful in getting a place for August 2015 in GP when will I have the programme shortened?

The programme is shortened in year 1, and reduced by no more than six months. The training programme director will discuss a balanced programme with you which will be agreed before you start to avoid repeating previous experience. The ATCF for transfer into GP aims to
preserve the principle of 18 months in general practice however this may be subject to local availability. However a minimum of 12 months in GP in the final year of training is mandatory.

Q13 If I apply and I am successful for a shortened programme is it the GP component that will be shortened?

A13 No. It will be a hospital post that will be taken out of your programme. Trainees will normally be expected to do 18 months in a standard general practice specialty training programme even if it is shortened.

Q14 If I am successful in achieving a shortened programme does that mean that I will be out of phase with the rest of the trainees in the region/LETB?

A14 Your training will now be 2½ or 3½ years instead of the standard three or four year training programme. It does mean that your GP component may be out of phase with the majority of your peers. The regions/LETB will be aware of this. The increased frequency of the CSA examination means that you will not be disadvantaged in availability of your end point assessments.

Q15 I am currently a trainee in emergency medicine and would like to apply for ATC. Is this possible?

A15 No. At the moment emergency medicine and the ACCS route for anaesthetics have not been included in ATC for general practice to minimise any risk to workforce pressures in urgent care. However, the GMC have indicated that if your specialty has been approved for ATCF that you may be considered for ATCF at the discretion of the Postgraduate Dean in the host and receiving LETB/Deanery.

For 2015 ATCF into GP has been approved but the process will be piloted (GP ATCF Process Pilot). For 2015 GP ATCF the following specialties may apply the ATCF and move into GP specialty training (GPST). This may be extended in subsequent years.

- Anaesthetics (Not ACCS route)
- General medicine (core medical training CMT) including geriatrics
- Obstetrics and Gynaecology
- Paediatrics
- Psychiatry

Applications from trainees in specialties not listed above but with specialty training curricula approved by the GMC for ATCF may apply for ATCF in GP at the discretion of the Postgraduate Medical Dean of the host and receiving LETB/Deanery.

Q15a If I have completed 6 months of a medical rotation and 6 months of an A&E rotation in ACCS ST1, can I apply for ATC to GP Training and if not why not?

A15a As above yes, however you can only use one approved ATCF specialty and the maximum allowable period for shortening the GPST will be no more than six months.
Q16  I have done two years in psychiatry and wish to apply for ATC. Does this mean that it will be a psychiatry post that will be taken out of my programme?

A16  If there is a psychiatry post in the rotation that you are recruited to then it is likely that this will be the post that will be removed. However, not all rotations will have the specialty that you have been working in and it will be a local decision on how your programme can be balanced if hospital posts are removed.

Q17  How can I demonstrate gaining GP competencies retrospectively from specialty training programmes?

A17  ATCF are not eligible for retrospective applications. However if trainees are applying for ATCF into GP they are advised to continue gather evidence in your current specialty contextually, that is community facing and includes communication skills and to comment upon it in your current e-portfolio.

Q18  If I ATC, will I be placed in regions whose training margin is under filled?

A18  Eligibility for ATCF is subject to local capacity and programme availability. Therefore, if your chosen locality does not have capacity you may be offered an area which has.

Q19  If I ATC, will I compete with pre-existing GP Trainees for specific training placements?

A19  No. Trainees recruited in the same cohort (rounds 1 and 2 each year) will have their programmes determined by the educational requirement for balanced programmes which will take into account prior experience for ATCF trainees.

Q20  At what point in the academic year do I need to decide to ATC?

A20  Applications for ATCF into GP have to be declared with the GP NRO application and cannot be applied retrospectively; therefore the decision to use the ATCF should be made when applications open in November 2014.

Q21  If I am an Academic or LTFT Trainee how will I apportion my experience to the ATC criteria?

A21  The ATCF will be available to academic and less than full time trainees and programmes would be mapped to the educational requirements for their programme.

Q22  What is the appeals process if my application is turned down?

A22  GP NRO has a published appeals procedure including ATCF, where ATCF has been at the Dean’s discretion or subject to local capacity and availability issues, applicants should appeal to the Postgraduate Dean.