

## Glossary of Medical Education and Training Related Acronyms and Terms

<b>ARCP</b>	The Annual Review of Competence Progression (ARCP) is a formal Deanery process which, informed by evidence gathered by the trainee and an Educational Supervisor's Structured Report, assesses a trainee's ability to either complete training or to progress to the next level of the training programme. The ARCP process is underpinned by appraisal, assessment and annual planning which precede it. An ARCP panel considers the evidence presented to it to make a judgement as to whether a trainee has attained all required competencies and has made adequate progress. In instances of an unsatisfactory outcome, the panel may make recommendations for additional or focused training required.
<b>CCT</b>	A specialty or GP trainee can apply for a Certificate of Completion of Training (CCT) following recommendation from the Royal College to the GMC that the trainee has satisfactorily completed their specialist/GP training programme. A CCT is issued by the GMC and confirms that a doctor is eligible for entry onto the Specialist or GP Register.
<b>Clinical Supervisor</b>	A Clinical Supervisor (CS) is a trainer who is selected and appropriately trained to be responsible for overseeing a specified trainee's clinical work and providing constructive feedback during a training placement.
<b>COGPeD</b>	The Committee of General Practice Education Directors (COGPeD) is a forum for all Postgraduate GP Directors to meet and share best practice. The chief aim of the Committee is to encourage and maintain a consistent approach to General Practice training across the UK.
<b>College Tutor</b>	The College Tutor is responsible for conducting and overseeing training and education in the Local Education Provider (LEP). Their main responsibility is to foster and develop the availability of quality training experiences with the support of other colleagues involved in medical education and training.
<b>Commissioning Process</b>	The Commissioning Process is one of the Wales Postgraduate Deanery's quality control processes designed to ensure high quality postgraduate medical education and training in Wales. The process involves an annual review of activity in Health Boards/Trusts in relation to the management and delivery of postgraduate medical education and training.
<b>Concordat</b>	The Concordat is comprised of a number of external review bodies who are responsible for regulating, inspecting and auditing health and social care. The signatories to the Concordat have signed an agreement which will support the improvement of services. One of the key aims of the Concordat is to improve the collaboration and co-ordination between the various audit and inspection bodies to reduce the burden of unnecessary external review.
<b>COPMeD</b>	The Conference of Postgraduate Medical Deans (COPMeD) is a forum which enables Deans to share best practice, discuss current issues and agree a consistent and equitable approach to medical training across the UK. The forum is a focal point for contact between Deans and other external organisations including, (amongst others) the Royal Colleges and the GMC for postgraduate medical and dental education matters.

<b>Core Training</b>	Core training is the first stage of uncoupled training which lasts for 2 years in most specialties. Trainees in core training will be Specialty Registrars (StRs). Successful completion of core training can contribute to the award of a Certificate of Completion of Training (CCT) and provides eligibility to apply for higher specialty training programmes in defined, related specialties and posts in the formal career grade structure.
<b>CPD</b>	Continuing Professional Development (CPD) refers to education and development activities undertaken to improve knowledge and skills in a specific professional area.
<b>Educational Agreement</b>	<p>An Educational Agreement is an educational development plan which is drawn up and agreed by the trainee and their Educational Supervisor. It sets out for the trainee:</p> <ul style="list-style-type: none"> <li>- The specific aims and learning outcomes for the next stage of training based on the curriculum and ARCP outcome (in the case of specialty trainees)</li> <li>- The clinical duties and arrangements for supervision</li> <li>- Details of training, and educational and competency goals</li> <li>- The Personal Development Plan and objectives</li> <li>- A schedule for appraisal and assessment</li> </ul> <p>The Agreement will form the basis of all appraisal discussions and be subject to regular review and updating.</p>
<b>Educational Appraisal</b>	<p>An Educational Appraisal is a formal meeting between a trainee and their Educational Supervisor at which the following are considered:</p> <ul style="list-style-type: none"> <li>- Progress in fulfilling the Educational Agreement</li> <li>- Development of the Learning Portfolio</li> <li>- Maintenance of an up-to-date log book (in some specialties)</li> <li>- Completion of workplace-based assessments</li> <li>- Performance in knowledge tests (usually Royal College examinations) at the appropriate stage(s) of the curriculum</li> </ul>
<b>Educational Supervision Tripartite Agreement</b>	The Educational Supervision Tripartite Agreement sets out an agreement between Educational Supervisors, Local Education Providers (Health Boards/Trusts) and the Wales Deanery within which the mechanisms for, and support of, educational supervision in postgraduate medical education and training are clearly defined. It is currently being piloted in selected specialties and locations across Wales.
<b>Educational Supervisor</b>	An Educational Supervisor (ES) is a trainer who is selected and appropriately trained to be responsible for the overall supervision and management of a specified trainee's educational progress during a training placement or a series of placements. The Educational Supervisor is responsible for the trainee's Educational Agreement.
<b>EPEF</b>	End of Placement Evaluation Forms (EPEFs) are a local tool which facilitate the routine collection of trainee feedback regarding individual posts within specialities. The forms may also be used by the Deanery in order to obtain trainee feedback on a particular area of concern.
<b>EWTD</b>	The European Working Time Directive (EWTD) is a piece of health and safety legislation which was introduced in 2004. The legislation applies to all staff including doctors in training who have traditionally worked long hours and provided out of hours cover. It sets up minimum requirements in relation to working hours, rest periods and annual leave. In response to the legislation the 'Hospital at Night' project was launched which is a model of shift patterns and staff mix for the NHS to use to assist in the implementation of the EWTD legislation.
<b>FACD</b>	The Foundation Achievement of Competency Document (FACD) is issued to trainees who have successfully completed the two year Foundation Programme. This document allows trainees to apply for Specialty training.

<b>Foundation Programme</b>	The Foundation Programme is a two year generic training programme which bridges the gap between medical school and specialty training. Trainees on the Foundation Programme are required to undertake a series of placements within a variety of specialties and healthcare settings giving them the opportunity to gain a wide range of experiences. Trainees who successfully complete the first year (F1) can apply for full registration with the General Medical Council. Trainees who successfully complete the second year (F2) are issued with a Foundation Achievement of Competency Document (FACD) which allows them to apply for Specialty training.
<b>Foundation Programme Directors</b>	Foundation Programme Directors (FPDs) work in conjunction with local educators, Deanery personnel and others to ensure that Foundation trainees have access to suitable training, appraisal and assessment as set out by the Foundation Programme Curriculum in order to allow them to gain the necessary competencies required for GMC registration.
<b>FTSTA</b>	A Fixed Term Specialty Training Appointment (FTSTA) is a stand-alone but educationally equivalent post which is not part of a run-through training programme. Appointments to these posts can only be made for up to one year, usually in the early years of training in a specialty.
<b>GMC</b>	The General Medical Council (GMC) is responsible for setting and monitoring standards in medical education for undergraduate, Foundation and Specialty training, including training in General Practice (GP). They run quality assurance programmes for UK medical schools and postgraduate deaneries to ensure that standards are achieved.
<b>GMC National Trainee Survey</b>	The GMC National Trainee Survey is an online questionnaire which provides an opportunity for trainees to give the GMC their views on the quality of medical education and training. The feedback provided in the survey also provides a key evidence source for the Wales Deanery to identify areas of good practice as well as those which may require further attention.
<b>GMC National Trainer Survey</b>	The GMC National Trainer Survey is an online questionnaire used to gather information and feedback from Clinical Supervisors, Educational Supervisors and GP Trainers on their role as a trainer and the support provided to them for this role.
<b>GPPD</b>	General Practice Programme Directors (GPPDs) have responsibility for GP trainees and for their education.
<b>Higher Specialty Training</b>	Higher Specialty Training takes place in the years following Foundation or Core training. Satisfactory completion of Specialty training leads to the award of a Certificate of Completion of Training (CCT).
<b>IMG</b>	In the UK the term International Medical Graduate (IMG) refers to overseas doctors and refugee doctors whose primary medical qualification is from a medical school outside the UK and EU. This term also includes UK citizens who have trained in medical schools outside the UK and EU, and overseas doctors who have trained in a UK medical school but do not have rights of residence.
<b>Induction Interview</b>	A meeting between an Educational Supervisor and the trainee for whose supervision they are responsible at which they will: <ul style="list-style-type: none"> <li>- Review progress in previous placements in a formal appraisal</li> <li>- Complete an Educational Agreement</li> <li>- Ensure the trainee understands his/her responsibility for his/her own learning, the structure of the programme, the curriculum, the educational opportunities available, the assessment system and the relevant Learning Portfolio</li> </ul>
<b>JACTAG</b>	The Joint Academy /COPMed Training Advisory Group (JACTAG) brings together the Academy of Medical Royal Colleges and COPMed on issues relating to Postgraduate medical education training programmes.

<b>JCPTGP</b>	The Joint Committee on Postgraduate Training for General Practice (JCPTGP) was the supervisory body which was responsible for overseeing General Practice training and for issuing certificates of training. PMETB (which has now merged with the GMC as of 1 <sup>st</sup> April 2010) took over the responsibilities of the JCPTGP when it assumed its statutory powers on 30 <sup>th</sup> September 2005.
<b>JRCPTB</b>	The Joint Royal Colleges of Physicians Training Board (JRCPTB) replaces the JCHMT and JCBMTC and is responsible for setting and monitoring standards for physician specialist training in the UK.
<b>Learning Portfolio</b>	A Learning Portfolio is a record (often electronic) of a trainee's assessments, achievements and other evidence demonstrating completed outcomes as specified by the General Medical Council (GMC). This can include logbooks, audit reports, research activity and publications. It should form the basis of the educational and workplace-based appraisal process and the annual planning process. It should also be used to store outcome forms from completed ARCPs.
<b>LEP</b>	Local Education Providers (LEPs) are the NHS Wales Local Health Boards/Trusts responsible for hosting and supporting postgraduate medical training and ensuring that trainees receive education and training that meets local, national and professional standards.
<b>Local Faculty Leads</b>	Local Faculty Leads (LFLs) are appointed by, and work in partnership with, the Wales Deanery to support and deliver high quality medical postgraduate education and training within Health Boards/Trusts. Local Faculty Leads have varying areas of responsibility: <b>Local Faculty Lead for Quality/Educational Governance:</b> They have specific responsibility for systems of quality control and implementation of the General Medical Council's standards across the Health Board. They work with departments where there are concerns regarding the quality of training and are responsible for promoting and sharing good practice. <b>Local Faculty Lead for Trainer Support:</b> Their role is to ensure systems for identifying and supporting all Clinical and Educational Supervisors across the Health Board, including helping to support and organise training events for trainers. <b>Local Faculty Lead for Trainee Support:</b> They have specific responsibility for ensuring that pastoral, professional and career support is available for all trainees.
<b>LTFT</b>	Less Than Full Time Training (LTFT) is open to Foundation years one and two, Specialty trainees, Specialist Registrars and GP Registrars. The purpose of the scheme is to give training grade doctors and dentists the opportunity to continue their training on a less than full time basis when full time work is impossible or unreasonable, rather than having to give up work. It provides the same range of experience and education as full time posts, though it takes longer to fulfil the educational requirements set by the Royal College or Faculty.
<b>MMC</b>	The aim of Modernising Medical Careers (MMC) is to ensure that more patients are treated by fully qualified doctors as opposed to doctors in training. This is achieved through the implementation of a new career structure which focuses upon obtaining competencies to gain career advancement instead of spending a specified amount of time within any given post. The revised career structure aims to prevent numerous Senior House Officers spending unproductive time within the same grade prior to obtaining a place in specialty training.
<b>NHS Wales</b>	NHS Wales is the publicly funded National Health Service of Wales providing healthcare to the population of Wales. It is the responsibility of the Welsh Government.
<b>NLIAH</b>	The National Leadership and Innovation Agency for Healthcare (NLIAH) is part of NHS Wales and works with Health Boards/Trusts to deliver better quality and safer patient services.

<b>NWIS</b>	The NHS Wales Informatics Service (NWIS) was established on 1 <sup>st</sup> April 2010 and is responsible for the strategic development of Information Communications Technology to support the transformation of the NHS Wales' services and the delivery of operational services.
<b>PLATO</b>	PLATO stands for Postgraduate Learning and Teaching Online. It is a virtual learning environment for trainees and trainers that provides online access to learning packages and reference materials relating to postgraduate medical education in Wales. It is provided by the Wales Postgraduate Deanery in partnership with NLIH and NWIS with the aim of providing a single portal for postgraduate medical education and training for NHS Wales as a whole.
<b>PMETB</b>	The Postgraduate Medical Education Training Board (PMETB) was an independent statutory body which was responsible for the approval of postgraduate medical education and training. It merged with the GMC on 1 <sup>st</sup> April 2010.
<b>Postgraduate Centre</b>	Postgraduate Centres are located in district general hospitals and psychiatric hospitals in Wales and provide the focus and location for vocational training both in medicine and dentistry as well as General Practice CPD activities. In addition to medical and dental educational activity, Centres are also increasingly being used to support multi-professional and inter-professional education.
<b>Postgraduate Organisers</b>	Postgraduate Organisers were appointed by the Wales Postgraduate Deanery and were based within Postgraduate Centres around Wales. They were responsible for identifying education and training needs, facilitating the provision of education through organising the delivery of programmes to address local learning needs and co-ordinating the evaluation of programmes.
<b>PYA</b>	<p>The Penultimate Year Assessment (PYA) is an external review of the assessment of a Specialist Registrar's training through the review of their training record. The aims of the assessment are:</p> <ul style="list-style-type: none"> <li>- To review and confirm that the training completed to date is satisfactory.</li> <li>- To identify any areas of clinical training which require completion within the last 12 – 18 months of their training.</li> <li>- To give a final and binding CCT date.</li> </ul>
<b>QA</b>	Quality Assurance (QA) is a system of planned and systematic management activities which are necessary to provide sufficient confidence that a product or service will fulfil quality requirements. The terms Quality Assurance and Quality Control are often incorrectly used interchangeably. Essentially, Quality Assurance is process-orientated, enabling you to ensure you are doing the right things the right way and Quality Control is product-orientated and concerned with ensuring that the results of what you have done are as expected. Within postgraduate medical training the GMC is accountable to Parliament for quality assurance. The GMC's approach to quality assurance is to review Deanery processes for quality assurance and they will expect to see evidence of both Deaneries and Colleges collaborating in order to implement approved curricula.
<b>QABME</b>	Quality Assurance of Basic Medical Education (QABME) is the framework which has been implemented to quality assure basic medical education. Basic medical education includes both undergraduate education and general clinical training which takes place during the first year of Foundation training. The General Medical Council has a statutory responsibility to establish and maintain the standards of basic medical education.
<b>QMF</b>	The Wales Deanery's Quality Management Framework (QMF) is designed to ensure that the Deanery's processes are fit for purpose, sufficiently robust and not unnecessarily burdensome. It is comprised of three inter-related elements of evidence, surveys and visits which enables the Deanery to monitor and report on the quality of postgraduate medical education and training across Wales.

<b>QMS</b>	Quality Management System (QMS) is the term which is often used to encompass the three key quality initiatives i.e. Quality Control, Quality Assurance and Quality Improvement.
<b>Quality Committee</b>	The Quality Committee advises the Dean on all matters relating to the quality of postgraduate medical education and training across Wales. The Committee reports directly to the Deanery's Management Executive Committee and is Chaired by the Sub Dean (Quality and Postgraduate Education Support). The committee comprises specialty and Health Board/Trust representatives and trainee representation as well as staff from the Deanery's Quality Unit and a Management Executive representative.
<b>Quality Control</b>	Quality Control (QC) is a set of routine activities that are put in place to measure and achieve or maintain a desired level of quality. Quality Control can be described as the tools which are in place to ensure that a set of outcomes are met.
<b>Quality Management</b>	Quality Management (QM) is used to refer to all aspects of the management function that determine and implement the organisation's direction on quality issues and may be represented as a Quality Management Framework. Quality management involves managing for continuous improvement and is centred on an overall quality mission, objective setting and review.
<b>Reconfiguration Clinical Lead</b>	Reconfiguration Clinical Leads are responsible for liaising with stakeholders to develop and implement the reconfiguration strategy. They Chair the Reconfiguration Project Board and work with a dedicated Project Manager to operationalise the project plan.
<b>Risk Reports</b>	Risk Reports are produced on a quarterly basis and are disseminated to Health Boards/Trusts and relevant specialty leads. They provide information on all of the areas of concern that are being monitored by the Deanery's Quality Unit at any given time and include a risk rating for each issue which is based on the severity of the issue and the probability of it affecting the quality of training.
<b>RITA</b>	<p>The Record of In-Training Assessment (RITA) is a review of a Specialist Registrar's progress throughout the course of their training programme. RITAs are conducted on an annual basis and result in one of the following four outcomes:</p> <ul style="list-style-type: none"> <li>- RITA C – This is the most common outcome of a RITA and is used to indicate a satisfactory level of progress within the training grade.</li> <li>- RITA D – This outcome is used to indicate that the trainee requires additional training which is targeted to address a specific need. During this period of training the trainee should receive feedback more frequently. It is important to note that awarding a RITA D is not an indication that the trainee is failing seriously.</li> <li>- RITA E - Awarded for a variety of reasons as stated below: <ul style="list-style-type: none"> <li>o To extend the duration of training enabling the trainee to obtain an additional qualification, complete a research project or obtain further specialist training.</li> <li>o Where an additional training period is required due to concerns about an aspect of a trainee's performance or progression. During the additional training period the trainee will receive an enhanced level of supervision.</li> <li>o To provide the trainee with additional time to obtain the full range of competencies required of a RITA G.</li> </ul> </li> <li>- RITA G - Used to indicate that the trainee has satisfactorily completed their training.</li> </ul>
<b>SAC</b>	The role of the Specialist Advisory Committee (SAC) is to ensure that the educational facilities and training environment of training posts are of a standard which enables trainees to achieve their educational goals and successfully complete higher specialist training. SACs are sub-committees of the JCHMT.

<b>Service Level Agreement</b>	The Wales Postgraduate Deanery commissions the training of junior doctors through healthcare providers such as Health Boards / Trusts. The Service Level Agreement (SLA) is put in place as a means of formalising the arrangement between the training commissioner and the provider. The Agreement stipulates a number of obligations which it expects the training provider to fulfil in return for a financial allocation to support staffing, educational facilities (and associated running costs) and study leave for training grade medical and dental staff.
<b>Specialty Training Lead/Deanery Advisor</b>	Specialty Training Leads/Deanery Advisors provide strategic leadership for all activities undertaken within the specialty. They work closely with stakeholders to provide specialty specific advice. They are also responsible for providing leadership and support to key staff within the specialty.
<b>STC</b>	Specialist Training Committees (STCs) exist to ensure that higher specialist training programmes are well structured and supervised and that the training provided is related to the relevant Royal College curriculum.
<b>Structured Report</b>	A Structured Report draws on the Learning Portfolio and summarises a trainee's progress through a placement. It should contain: <ul style="list-style-type: none"> <li>- The Learning Agreement and objectives agreed at the start of a placement</li> <li>- Evidence from workplace-based assessments</li> <li>- Any modifications to the Educational Agreement</li> <li>- Details of any remediation undertaken during the placement</li> <li>- A synthesis of evidence from the Learning Portfolio including the trainee's assessments, experience and educational activities</li> </ul>
<b>Supervising the Route to Excellence</b>	The Supervising the Route to Excellence (SRE) Programme is a key component in the Wales Postgraduate Deanery's commitment to delivering high quality postgraduate medical education and training. This quality enhancement Programme comprises five projects which combined will result in an explicit statement of the role of the Educational Supervisor underpinned by systems of support and training, feedback and recognition.
<b>Targeted Process</b>	The Targeted Process is a reactive process employed by the Wales Deanery to investigate possible evidence of failure to meet the GMC's standards for training, which it is deemed cannot be dealt with by other routine quality management processes.
<b>Training Programme Director</b>	Training Programme Directors (TPDs) are responsible for managing specialty training programmes including core training and Fixed Term Specialty Training Appointments (FTSTAs).
<b>Welsh Government</b>	As the devolved government for Wales with a remit that includes responsibility for health, education and the environment, the Welsh Government provides the Wales Deanery with funding to train junior doctors and dentists. The number of trained medical and dental professionals required in future years is forecasted by the Welsh Government.
<b>WPBAs</b>	Workplace-Based Assessments (WPBAs) are assessments of a trainee's competence based on what they actually do in the workplace. The main aim of WPBAs is to aid learning by providing constructive feedback. They also assist trainers in monitoring a trainee's progress and can be used to inform ARCPs.

**WALES DEANERY**  
**(‘SCHOOL OF POSTGRADUATE MEDICAL AND DENTAL EDUCATION’)**

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