NHS England

To: • Educational Supervisors and DCTs

cc. • TPDs and APD

WTE NHS England
Blenheim House
Leeds

3 April 2025

Dear Colleagues,

IRCP DCT1 (Secondary Care) Guidance

Please find below a guide detailing the requirements for iRCP

Guidance for Primary Care (DFT) Programmes will be issued separately.

IRCP panels for both Primary (DFT) and Secondary (DCT) placements will convene on Thursday 10th July 2025.

The deadline for portfolio evidence submission is CoB Thursday 26th June 2025.

IRCP Outcomes

The IRCP (Interim Review of Competency Progression) panels will be sitting on the 10th July 2025

The purpose of this <u>formative</u> RCP process is to give guidance on areas for you to focus on for the remaining part of the DFT year. It will also recognise the progress you have made so far and incorporate TPD feedback which will be uploaded into the TPD Upload section of the report, your ES may also you the ES Upload section of the portfolio to upload any further evidence that supports your progress and development.

The IRCP ES report should be completed jointly between the ES and DCT, this can be scheduled during protected learning time. The meeting itself is logged separately as outlined below.

There are three possible outcomes for IRCP.

Outcome 1: Achieving Progress at the expected rate
Outcome 2: Areas of development or experience required before completion
Outcome 5: Incomplete evidence presented

When the panels sit, they will only have the information within the portfolio to base recommendations on, if areas are incomplete then you are likely to receive an Outcome 5 which could raise a possible professionalism/engagement concern. To help you prepare, the table below details the minimum requirements. Please pay particular attention to recording your own learning needs.

Portfolio Summary Requirements

iRCP Requirement	Location of Evidence on AXIA Early Years Curriculum e-portfolio	Uploaded
Completed educational/learning agreement	Induction section	☐
Completed induction checklist	Induction section	☐
One or more completed clinical supervisor reports *The named clinical supervisor should be a senior clinician who regularly assesses your progress and should not be another trainee.*	Enter as an Ad Hoc ES Report	☐
A **minimum** of 12 completed from DCT (signed and saved) Supervised Learning Event entries • **at least 4 DOPS** • **at least 2 CEX** • **at least 2 CBDs** *SLEs should be completed by a range of assessors (not by another DCT) and should be undertaken over the breadth of the training year.* *Remove all patient identifiable information.*	Supervised learning events section / try to make them clear in title eg from DFT or DCT	☐
Supervised Learning Events linked to the Entrustable Professional Activities *Maximum of 2 EPAs linked for any one SLE*	Reports Sections: Entrustable Professional Activities Log *NB: these must be linked when completing SLE's for these to appear in this section*	☐
Completed Initial and Interim Educational Supervisors meetings (separate from the formal ES report)	Educational supervisor induction meeting: Induction section Interim ES meeting: Record in the ES Uploads Section using this template Educational Supervisor	☐
An Interim Structured Educational Supervisor's Report	Interim review of competency progression section: using AXIA template	☐
An ES agreed PDP with *SMART* targets and documented progress	Clearly labelled in Uploads Section: akin to this GDC PDP Template	☐
Involvement in Teaching *(not mandatory for iRCP)*	Clearly labelled in Uploads Section:	☐
Involvement in Research *(not mandatory unless in an Academic training post)*	Clearly labelled in Uploads Section:	Uploaded ☐ Not applicable ☐

Clearly labelled logbook of clinical activity • Within 4 weeks of iRCP date • Word documents / PDF / Excel spreadsheets acceptable *Remove all patient identifiable information.*	Clearly labelled in Uploads Section	☐
Clearly labelled uploaded clinical governance or quality improvement project with progress report and personal reflection (can be Word Document) *Remove all patient identifiable information.*	Portfolio documentation ◊ Quality Improvement section	☐
Clearly labelled attendance at local study days • Can upload summary document if available • Can create single document with relevant certificates for uploading *DCT Mnadatory Study Day attendance is expected for FRCP only.*	Clearly labelled in Uploads Section	☐
Log of CPD • With reflections and development outcome domains akin to that required by GDC (*for monitoring purposes only; will not contribute to Outcome*)	Clearly labelled in Uploads Section: akin to this GDC CPD Template	☐
Completed and published MSF from DCT (min 10 responses)	Feedback section ◊ Multi-Source Feedback	☐
Completed and published Patient Satisfaction Questionnaire from DCT (min 10 responses)	Feedback section ◊ patient satisfaction questionnaire	☐

If you have any questions or require clarification on the IRCP process and information within this guidance, please contact your TPD.

Yours sincerely,

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