UKCEA CONFERENCE 2013
‘First Class Patient Care Through First Class Training’

The Oxford Hotel, Oxford
24th – 26th September 2013

WORKSHOP DETAILS

A Creating Capacity. How far can we push the boundaries?
This workshop will explore the ways in which different deaneries are dealing with capacity issues – both under and over capacity. Explore hard to answer questions:-
• What are the minimum educational requirements for a new trainer?
• Is it better to start to train then learn more, or to learn the theory first?
• Can nurses and managers be approved as supervisors?

Use the London capacity project as a worked example, to consider how to create complex change without undermining governance.

Presented by Michael Grenville and Rebecca Torry

B First Class Selection for GP Specialty Training.
There will be a brief description of the Quality Management feasibility exercise completed during Round 2, May 2013. This is part of a COGPED imperative to achieve a Selection process which is standardised, as well as of a high standard.

The workshop will then focus on how the Selection process can be further enhanced to demonstrate standardised behaviour in all training organisations, demonstrating in particular an equitable process for all candidates.

This is likely to appeal to the current Selection leads in each organisation as well as to anyone with an interest in Quality and fair play.

The outcome will be a clear understanding of the changes required for Selection in 2014 and beyond.

Presented by Peter Haig, Bob Kirk and Roger Price
**C Conversations inviting change.**
This workshop will introduce participants to ‘Conversations inviting change’, a model of advanced communication skills based on narrative studies and systemic family therapy. First developed at the Tavistock Clinic by John Launer and Caroline Lindsey, it is now taught widely to clinical teachers in both primary and secondary care at the London Deanery. ‘Conversations inviting change’ is a generic model that can enrich all professional encounters with patients and their families, and with colleagues, trainees, appraises and teams. Its emphasis on curiosity, contexts and complexity are particularly suited for the future generalist. The skills – including ‘circular questions’ – are particularly useful in helping people to move on in situations where they feel stuck.

The aim of the workshop is to introduce participants to some of the background ideas and to give them a brief opportunity to develop their conversational skills further.

This interactive workshop will include a brief theoretical introduction to the model, a demonstration of some of the conversational techniques and a chance for participants to practise skills using material from their own professional experience.

**Presented by Sarah Divall**

**D Managing Teachers in Difficulty.**
This is intended to be an interactive workshop where participants will share their experiences of working with and supporting ‘Teachers in Difficulty’.

Intended objectives are to share experiences and identify common themes, including a possible review of policy(s) for educational organisations.

**Presented by Dr Vineet Thapar**

**E Do I know what I need to learn?**
Hearing the voices of International Medical Graduates (IMGs) about their learning needs for UK GP Training.

**Aims**
- To enhance understanding of the learning needs of IMGs
- To consider how current induction arrangements cater for learners
- To identify changes to training which might better support IMGs

**Objectives**
- To explore a qualitative study of IMGs' perceptions of their learning needs for GP training
- To consider the roles of acculturation, transition and socialising in building success
- To explore ‘deficit model’ blocking progress for trainees
- To share experiences and explore how simple changes in how we approach and deliver training might improve and enhance progress for IMGs

**Methods**
- A brief presentation of Masters research findings into the perceptions of IMGs as to their learning needs and how these could be better addressed in UK GP training
- Facilitated discussion of issues which emerged, specifically:
  - A ‘deficit model’ / Feeling valued
  - Cultural context: Understanding what UK General Practice actually is
  - Understanding the NS
The discussion will be stimulated by distribution of key quotes from the research to small groups, to try to evoke understanding of the IMGs’ perspectives

Plenary of ideas amongst the group, and sharing of some ideas which would improve the current state of play, certainly in KSS

Take Home Messages:

- Bespoke induction planning for IMGs which covers the areas of their perceived weakness, based on educational not managerial principles
- Improved cultural training for educators, particularly regarding professional transitions, and to avoid the ‘deficit model’
- Provide a glossary of terms, and make no assumptions about what IMGs know about the NHS

Evaluation:

- Participants will be invited to feedback their ideas about the session, suggesting any improvements or changes which might make it more interactive and effective in moving things forward

Presented by Dr Christopher Warwick

Developing Professionalism in the Trainee Doctor.

This workshop will consider the domains of professionalism, and share our experiences on how we can work together to achieve a greater level of professionalism in our trainees. We will present findings from a recent GMC pilot induction programme for doctors new to UK practice. The purpose of this pilot was to help doctors better understand and apply the principles of Good Medical Practice by exploring issues relating to medical ethics and practice in the UK.

Presented by Vijay Nayar and Sunil Kapur

Shifting expectations in Training.

No longer do trainees seem to simply expect to be educated and to become a competent and good GP. They now insist instead on training aimed solely at passing the MRCGP and gaining a CCT. Should they not reach an acceptable standard in any of the Assessments (AKT, CCSA or WPBA), this failure often seems to be laid at the door of the Deanery with little or no appreciation of own responsibility in part for their failure to succeed.

In Wessex we have noticed an increase in Trainees who expect the Deanery to individually modify GP Training Programmes and support to accommodate their personal circumstances outside the normal provision of training, educational and work opportunities provided even by LTFTT.

This workshop is to share the experiences of senior educators, look for trends in the expectations of trainees and communicate any solutions to the perceived problems when trying to accommodate these trainees’ expectations.

Presented by Johnny Lyon-Maris and Richard Weaver

Telephone Simulation Modules to Improve Confidence of GP Trainees Starting their First General Practice Placements.

The transition from hospital posts to general practice is a time of challenge and steep learning for general practice trainees. Simulated telephone consultation modules to support trainees starting general practice placements were developed as an SHA Simulation Fellows
Trainees identified telephone consultations as an area of concern when first starting general practice as they are seldom encountered in hospital placements but are an increasingly large part of GPs' workload. Telephone consultations provide an ideal medium to simulate interactions not just with patients, relatives and carers but also with both primary and secondary care colleagues.

The modules are focused on specific areas of knowledge, skills or behaviour identified by trainee groups as learning needs when starting general practice. An overriding theme throughout the modules is developing consultation skills using Neighbour's model. Each module follows a standardised template including briefings for the doctor and the patient or colleague, notes for the facilitator and handouts for the trainees. The intended learning outcomes are mapped to RCGP curriculum statements and competency areas. The template was adapted from a generic template developed by South Central SHA simulation fellows which is being used across the specialities. Individual modules can be used for focused learning or half day workshops can be run using three or four modules.

The workshop will briefly describe development and trialling of the modules followed by a practical demonstration of using the modules with a small group.

Learning objectives:
- To promote the telephone simulation modules and provide a practical demonstration to enthuse educators to use the modules to run sessions with their trainees.

**Presented by Suzie Gill and Simon Newton**

**Enhanced GP Training – a tried and tested model.**

The Career Start scheme run by North of Scotland deanery, has recruited approximately 60 newly qualified GPs, over the last 8 years and is a working model of enhanced GP training. Career Start GPs join the scheme for 1-2 years. They spend 70% of their working week in primary care, and deliver at the interface of primary and secondary care for the remainder of the week. During the scheme recruits work both to gain specialist skills and enhance services within primary care, based on the philosophy of adult learning. We have emerging evidence that those who graduate from the scheme are empowered with enhanced maturity, confidence and leadership skills. Their innovative approach enables a continued contribution to service redesign which they take forward into their future careers to the benefit of GP, NHS service and the individual doctor.

Our workshop will explore:
- The embedded adult learning model
- The challenges
- The achievements
- The pitfalls – and how to avoid them – when designing a 4 year enhanced GP training model

**Presented by Vicki Guthrie and Anna Simpson**

**How not to end up in Court – Reflections on experiences of complex ARCP appeals and Employment Tribunals (ET).**

Mersey Deanery has had a record number of ARCP Outcome 4 appeals this cycle – most have been due to repeated examination failure following a period of extension. In addition we were one of 3 Deaneries as co-respondents for the ET and Judicial Review of the CSA.

The workshop will focus on the lessons learned in preparing for the above:
- How to follow correct process for ARCP panels
- How to conduct an ARCP panel
- Documentation and follow up – the importance of the Step 1 review and written plans and outcomes
- Congruence in application of the Gold Guide
- How to conduct an ARCP appeal panel
- How to prepare a statement of case for proceedings e.e. Deanery SOC for ARCP appeals and similar for Employment Tribunal
- Feedback on tactics we have observed by trainees and their representative/supporting organisations and how to manage that through correct processes.

**Presented by Jane Mamelok**

**K**

**The Emotional Impact of Supporting Trainees in Difficulty.**

**Aims:**
- To share good practice around supporting Trainees in Difficulty in particular relating to emotional support for Trainers
- To understand how we support Trainers who support Trainees in Difficulty and what their emotional needs may be

**Objectives**
- To learn from each other what has worked well
- To share the findings of a research project
- To explore other methods that can be used to support the emotional needs of Trainees in Difficulty and their Trainers

**Plan for Session**
- Short presentation to share findings of a research project including: Top 10 effective strategies and the Emotional Impact of Supporting Trainees in Difficulty
- Exploring the concepts of Emotional Intelligence and Emotional Labour and how these link to how we support our Trainees and Trainers
- Group work sharing good practice regarding how we support our Trainees and Trainers, and exploring what else could be tried
- Feedback and action planning

**Presented by Debbie Taylor**

**L**

**When relationships break down – Marriage Guidance for Medical Educators.**

Sometimes the relationship between a trainee and a trainer becomes strained. Much has been written about the “trainee with difficulties” but sometimes it can be difficult to tell if the problem lies with the trainee or the trainer. How can we mediate in these situations? What options do we have? The aim of the workshop is to understand some principles of mediation, and to share examples of good practice between the participants.

**Presented by Simon Newton and Jon Elliman**

**M**

**Cultural and linguistic factors in candidate performance in the Clinical Skills Assessment component of the MRCGP.**

To introduce trainers to a systematic way of using video consultations which focuses on communications in the CSA.
This workshop is based on a two year joint research project between the RCGP and King’s College London to identify the performance features of candidates which lead to relative success or not in the CSA. One third of candidates are IMGs and they are disproportionately represented in the failed group of candidates. The workshop will pilot some e-learning materials which address some of the challenges that candidates face in interaction with actor-patients. Clips from the CSA exam will be used and some micro-analytical techniques showcased.

**Presented by Celia Roberts**

**Resilience – can we teach it?**

The subject of Resilience is both topical and relevant to all our lives. However, it can mean many different things in different situations and to different people. Some “have it” and others don’t – but can we actually teach it?

The aim of the workshop will be to share ideas, experience and expertise with a view to considering how we may teach the subject to trainees.

During the workshop will consider the meaning of “resilience” and briefly look at background theory and research. There will be the opportunity to help develop a teaching tool for use with different groups.

**Presented by Elizabeth Barr / Jerry O’Rourke**

**Closing the gap: how can newly qualified GPs be better prepared for commissioning and general practice in the new NHS?**

As a result of the Health and Social Care Act (2012), GPs are now facing the reality of Clinical Commissioning and wider changes in the NHS landscape. Primary Care requires a GP Workforce prepared for the new roles they will face.

This interactive workshop will focus on preparedness for practice of newly qualified GPs. It will, firstly, share the findings of a qualitative research project exploring the views of recently qualified GPs about how well they feel their training prepared them for their role; and secondly, seek the participation of the audience in reflecting on the outcomes and implications for GP training. A brief presentation will be followed by workshop participants having time to look at short extracts from the data in groups and explore possible solutions to perceived gaps in knowledge and skills. A round-up of ideas will conclude the workshop giving some guidance for those involved with the future planning and delivery of GP Education.

**Presented by Holly Hardy and Abby Sabey**

**Do we really want nurses taking responsibility in primary care?**

A discussion group to debate the role of deaneries in:

a) Training of nurses (pre-registration) – should we be involved and how?
b) Postgraduate training programme in practice nurses/nurse practitioners – where are we? What should we be doing? How will we do this?
c) The experienced nurse – how do they feel? (a research project findings from across the UK will be presented) how should we respond as GPs in practice? How should we respond as deaneries?

**Presented by Steve Holmes**
Super-Condensed GP Curriculum Guide for Hospital Placements.

GMC requirements for GP training require ongoing quality assurance to ensure training posts and programme have the potential to meet the requirements of RCGP curriculum. When considering whether training posts meet these requirements, information is triangulated from a wide variety of sources. These have indicated a lack of consistency across the region. The GP unit set out to work collaboratively across the specialities involved in the GP rotations to enhance the development of specialty training posts with respect to future GP career and curriculum coverage, and improve consistency across the region. To this end, a tool was created to signpost the current learning opportunities available in the hospital posts to the trainee, to facilitate discussion regarding specific PDP objectives, and improve hospital post relevance to General Practice.

Learning Objectives for the Workshop:
- To review the process by which the SCCG was created
- To review the expectations of educational opportunities provided and see how they support the trainee in meeting the curriculum learning outcomes
- To explore the SCCG documentation and how it is used by clinical supervisors and trainees
- To be able to create and action plan based on example trainee confidence self rating scale in various SCCG guides

Presented by Heather Peacock and Elaine Taylor.

Educating the Educator – How do we learn in groups?

The focus of this workshop is to explore with GP educators the factors affecting learning from interaction with peers in groups. I plan to explore models of peer learning used in deaneries to support trainers. This will be an opportunity to understand the experience others have had in promoting reflective discourse. In this way the workshop will provide a platform for sharing good practice in bringing about the professional development of GP educators.

Concepts that are helpful in considering peer learning are theories about group dynamics and frameworks for learning in groups such as action learning sets. I am interested in models of learning such as experiential learning and learning associate with talk.

Additionally I am aware that underlying emotions within groups can influence the experience of an individual. Exploring the barriers to the participation of trainers in these groups highlights interesting aspects. Please join us to share your experience and your successes.

Learning Objectives:
- To consider the intrinsic and extrinsic factors that affect educators engaging in reflective practice in groups
- To explore how group dynamics influence individual and collective learning
- To explore models of CPD delivery for GP educators across the UK

Presented by Mary-Rose Shears

Communication Skills Through Drama Training.

The GP School in Wessex Deanery has started using a Drama approach to help trainees who are struggling with communication skills. We have run group sessions, looking at posture, voice and gesture to enhance communication, using experienced drama teachers.
as facilitators. We now also offer 1:1 sessions for individual trainees and we plan to demonstrate this approach to GP trainers to see if they can incorporate it into their own teaching.

We would like to demonstrate to UKCEA delegates how our intervention works. We hope for feedback from other Deaneries on how they teach these skills and how we may be able to refine our own workshops.

Presented by Jo Murphy, Simon Newton and Martin Essigman.

Confounding Expectations: Lessons learned and next steps.
In June 2013 East Midlands is hosting a conference entitled Confounding Expectations, about the issues surrounding IMGs and how we can best help them to succeed in speciality training. It is hoped that this will also lead to the development of a network of educators with a particular interest in and expertise on these issues.

This workshop aims to:
- Feed back on the conference highlights
- Summarize and share the successful strategies that emerged
- Provide a forum for the network of interested educators to continue to develop

Presented by Helen Mead and Sarah Layzell

How do we stretch the more able GP trainee?
This workshop will present some original research findings about stretching the more able trainee. This research has consisted of interviews with educators, an online trainee questionnaire and a review of Deanery websites.

We will then encourage an interactive discussion about what these findings mean for trainees, educators and Deaneries, and then derive some practical ideas to take away and share with our teams.

Presented by Nigel Scarborough and Sue Cullis

Implementing Broad Based Training – Sharing Best Practice.
The National BBT Pilot has recruited doctors to start the scheme in August 2013. KSS is one of seven pilot sites with trainees recruited to three sites. The curriculum has provided guidance on the trainee’s progression through the programme and moving forward with implementation of the pilot has revealed significant opportunities to work across Schools and share practice and explore the generalist agenda. However, with implementation the “devil is in the detail” and there are a myriad of administrative and educational processes which have required consideration and planning.

By the time we gather in the UKCEA our BBT trainees will have embarked on their first few weeks of the programme: time to reflect on the implementation process and look forward to what a positive evaluation of the programme will look like. Time also to re-examine the role of the Generalist – what is the role and should the agenda be furthered? Will BBT deliver the future generalist or should we be exploring more integrated programmes between primary and secondary care?

Learning Objectives:
- To share experience of developing the national BBT pilot across the pilot sites
- To reflect on the opportunities, challenges and solutions found when preparing to implement BBT
To share best practice in relation to the BBT programme
To explore the role of the medical generalist and the training programmes that could best deliver this?

Presented by Hilary Diack and Mary-Rose Shears

The training and assessment of practical skills and procedures in general practice.
The main objective of this workshop is to discuss GP training and assessment in practice skills and procedures. This is important because there is a push to drive more UK healthcare delivery from secondary to primary care. Research shows that patients prefer having procedures performed in primary care compared to a hospital setting and that it is cost effective. We present research indicating that Newly Qualified GPs (NQGPs) are not particularly well equipped to meet this need, that that GP Trainers lack confidence in teaching practical skills.

We also present data on what NQGPs and GP Trainers (in Dorset, Bournemouth & Poole) thought should be core skills, “mandatory to acquire before MRCGP qualification”, as the basis for group discussion on whether GP training should be modified to include more practical skills. Currently trainees are required to complete three mandatory Directly Observed Procedural Skills (DOPS) as part of their MRCGP Workplace Based Assessment (EPBA). These are taking a cervical smear, recording a BM and applying a simple dressing.

However, there are plans for a move away from mandatory DOPS as it is recognised that the psychomotor skills of examination and procedures are integral to diagnosis and management and should be assessed as part of our professional competences. There is a debate to be had within the educational community to establish a consensus of what skills and what standards are acceptable and also how best to assess these skills in the workplace.

Presented by Emer Forde, Clare Wedderburn and Simon Street

What’s happening in Quality Management?
This workshop is designed for those that have an interest in, or responsibility for, quality management (QM) in their GP Schools.

Each participant will be invited to discuss a QM initiative that they have led (or would like to lead) in their School.

- Why did they do it?
- What went well?
- What were the challenges?
- Did it result in change?

Presented by Michael Harris

Training for deviating health systems.
Devolution and recent health care reforms in England are changing the delivery of health care and training within the UK. This workshop will explore the challenges this presents in terms of recruitment, training provision and curriculum to enable trainees to work in general practice throughout the UK.

The format will be informal discussion and sharing good practice.

Presented by Mair Hopkin and Andrew Eynon-Lewis
**Improving Trainer Feedback to Registrars.**

We delivered training to all our trainers in using a modified version of ALOBA to focus feedback to trainees on specific areas of their consultations. We wanted to target as many trainers as possible, so we included this training in our annual trainer study days. It was therefore necessary to offer quite a short intense session.

The workshop involves an actor who role plays only small sections of her repertoire of roles (2-3 minutes) with a trainer who is himself role playing a trainee with a specific difficulty while a third trainer plays the role of trainer. During deconstruction, trainers are allowed to suggest alternative approaches and are encouraged to substitute into the ‘hot’ seat and try them out. Feedback is largely restricted to the process rather than the specific skills of the ‘trainer’. The role of the facilitator is to outline the process, maintain timings and safety. In the evaluation, the facilitator allows the group to reflect on applying this model to video as well as role play. In the Deanery, these workshops were run for a full half day, but we feel that we can give a good flavour of how it works in a 90 minute workshop.

We deliberately didn’t add a layer of feedback to the person playing the trainer as we felt that information and personal reflection after experiencing the process would be less threatening and also prevent an already complex process getting out of hand.

Our aims in running the workshop were:
- Bring enthusiasm back to the teaching of consulting skills
- To encourage trainers to keep/restart using video
- To provide them with another tool which might facilitate giving accurate, specific and useful feedback (for many this was activated prior learning)

Our aims in delivering the workshop at UKCEA:
- To demonstrate a brief intervention which seems to have an effect on trainers’ behaviour.
- To see whether this appeals to other Deaneries.

Presented by Richard Stokell and Mike Cranney

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KSS has developed an innovative Masters programme in partnership with Kent University. Forty three GP trainers have successfully completed the Postgraduate Certificate and the Diploma phase launched. Programme content is focused on the role of GPs as clinicians, educators and workers in a multidisciplinary team. A portfolio based assessment is aligned to trainer accreditation and revalidation.

The development of the programme has itself been an education, with challenges and successes captured in the formal evaluation of the pilot GP certificate programme. The programme has been externally evaluated and whilst it is acknowledged this is at Kirkpatrick level 2 there are early suggestions that patient care has been improved.

**Learning Objectives:**
- To share experience of developing the KSS Masters in Strategic Leadership and Medical Education programme.
- To share the formal evaluation of the PG Certificate programme.
- To explore experiences nationally of collaborative working with HEIs in developing programmes for GP Educators.
To consider the impact of NHS changes on academic development programmes for educators.

**Presented by Hilary Diack and Abdol Tavabie**

**BB** Play and Learn – using a board game to develop educational supervisors

This workshop will describe the use of a board game which was developed to steer Educational Supervisors through some of the challenges of the GP training year. At this workshop we will discuss how a game can deliver learning, when it is an appropriate medium, what the relative advantages and disadvantages may be, and what other learning topics would be suitable for a game format.

**Presented by Anna Simpson and colleague**

**CC** Moving with the times ..........cutting edge planning for the future

To hear a short presentation on the NHS and its needs for the future.

To explore the needs of the NHS and health service as a whole (long term conditions, increasing demand, increasing complexity, ageing population).

To identify the key areas that GP training and community training should address (10-15m consultations, management of complexity).

**Presented by Steve Holmes**

**DD** The GGP Practice training environment, does it impact on preparedness for practice?

Learning objectives – this workshop intends to enhance participants’ understanding on the way the working environment can impact on learning and preparedness.

The purpose of the workshop is to review published literature on workplace learning and preparedness. Working in groups, participants will be asked to reflect on the findings and their relevance to General Practice training. Finally results form a research study on the way GP trainees and early career GPs describe preparedness and perceive the training environment to impact on preparedness will be briefly outlines.

**Presented by Sharon Wiener-Ogilvie**

**EE** Informal workshop to discuss research in GP Education.

Informal workshop/meeting for those interested in educational research. Participants are encouraged to bring discussion points/papers to share with the group. Some possible ideas of areas for discussion are:

- Recent work (published and/or in progress)
- Trends/directions in GP educational research
- Research methods and practical issues
- Research methodology – reflect on those in use etc.
Those interested in participating will be contacted prior to the session so that we can identify/share topics in advance.

**Presented by Samantha Scallan**

**FF Distress in Primary Care, Shifting Paradigms and the Lessons for GP Training.**

Background: This workshop is about teaching GPs but the discussion is applicable to all health professionals, as the questions are fundamental to how we improve patient outcomes.

Fifty years ago Ballint published his work on “the doctor, the patient and the illness” describing how psychological problems can manifest as physical problems, and the doctors “as a drug”. Since then we have been introduced to numerous consultation models but what is the evidence that these techniques improve patient outcome for psychological issues?

Method: The first major educational intervention on a national scale was the Defeat Depression Campaign. IN this workshop we will look at the impact, and lessons learnt. Participants will be presented with some randomised controlled trials of GP education to improve psychological management and outcomes of patients in particular depression. The evidence from trials shows no improvement compared to control GPs and their patients.

Results: The workshop will go on to debate if the problem is the evidence base for the treatment of depression or the educational intervention or if RCTs are the appropriate methodology to assess how we teach GPs. Are we kidding ourselves about non-independent evaluations of GP education? Why do non-randomised studies often show positive effects?

Conclusion: Participants will have a greater depth of understanding of RCTs in education and bring about change in GPs and GP trainees, and will seriously question what they are currently doing.

**Presented by Martin Wilkinson**

**GG Systems Learning through GPST Significant Event Auditing.**

This workshop will offer participants an opportunity to consider Systems Learning through GPST Educational Significant Event Auditing.

Over the past three years the North of Scotland Deanery GP team has established a pattern of conducting routine Educational SEA events following complex fails in the MARCGP and also following significant adverse educational events involving GPSTs in hospital posts. The learning from these events has contributed to system changes and quality improvements at local and national level. (Ref: Sneddon, MacVicar, 2012 Education for Primary Care “The impact on the educators of ‘complex fails’ in the MRCGP: ensuring systems learning through significant event auditing”)

This workshop will offer participants an opportunity to consider some of the:

- Learning from these GPST Educational SEA events
- Experiences of similar GPST Educational SEA events occurring in other deaneries
- Potential learning opportunities through adoption of this approach in their own deaneries.

**Presented by Ali Sneddon and Tim Jones**
**Forum of GP Education Managers (FOGPEM) Workshops**

1. **Single Employment of GPSTs in Severn: From Tender to Implementation**
   Learn about the implementation of a single employer in Severn including intended and unintended benefits of having a single employer, what we would do differently if we could, and plans going forward for the school and Severn.

   This will be an informal discussion with plenty of time for questions. We hope to give you helpful tips and advice for your own schools to consider, and complement KSS’s presentation at the 2012 UKCEA.

   **Presented by Bill Irish and Shara Paulo**

2. **How to make the best use of your Lay Assessors**
   **Presented by Rod Walker**

3. **Revalidation – How it went and what we learnt**
   **Presented by Branwen Thomas**

**Medico-Legal issues with poorly performing doctors in training.**
This workshop will explore the medico-legal issues which can arise from poorly performing doctors in training. Drawing on our experience of cases we will highlight the principles to be aware of and the pitfalls to avoid when managing these often sensitive and difficult situations. We will outline the interface between Revalidation Remediation and the GMC and the assistance that MDDUS can provide in these challenging times. There will also be the opportunity to share your own experiences with your colleagues.

**Presented by Jim Rodger, Head of Professional Services and Susan Gibson-Smith, Medico-Legal Adviser for MDDUS**

**Creating a programme for your organisation to support GP trainees improve primary care outcomes.**
GP trainees working on the frontline get a unique insight into how to improve healthcare. We also believe they are fundamental to developing new ideas that will make primary care better.

In this workshop we aim to show you how you can support GP trainees deliver a local quality improvement programme in your organisation. You will:

- Learn the role of GP trainees in supporting CCG and local practice improvement
- Understand resources and support available to help you achieve this aim
- Hear how other organisations in primary care have delivered trainee led improvement
- Be prepared to start a local quality improvement programme with your trainees

**Presented by Ashley McKimm**
MEETINGS
TUESDAY 24 SEPTEMBER

UKCEA/APCE Think Tank
10am – 12.30pm

COGPED pre-meeting Group
10am – 2pm

COGPED main meeting
2pm – 6pm

FOGPEM
1.30pm – 5pm

WEDNESDAY 25 SEPTEMBER

The DALS meeting
4pm – 7pm

Deanery Out of Hours Group
Time to be confirmed

GP Specialty Standards Working Group
10.15am – 12.45pm