

**Applicant and Assessor Guidance for ST4 Anaesthesia
Portfolio Self-Assessment Scoring Applicable for entry for February 2024**

Applicants should use this document to guide the upload of all required evidence for ST4 portfolio self-assessment scoring. Assessors should use this document for correctly verifying the score of all relevant documents and evidence.

At the point of application, applicants enter a self-assessment portfolio score based on the ST4 self-assessment scoring matrix. At a later date (in the evidence upload window) applicants will be requested to upload their evidence to the self-assessment portfolio portal to support the self-assessment score. The evidence provided will be verified by an experienced clinical assessor.

For February 2024

The ST4 Application window is: Tuesday 25 July to Tuesday 15 August 2023.

The ST4 Self- Assessment document upload window is from: Tuesday 29 August to Tuesday 5 September 2023.

August 2024 dates to be confirmed.

Applicants can provide 'additional' evidence after the initial application date.

Applicants must not change the self-assessment score from the initial score they submitted on their application at any point in the process. Applicants must justify in the title box on the portal a specific reason requesting a change of score. Please note there is a limited word count in the title box. The assessor will look at the comments and assess the additional labelled evidence. This change has been introduced to allow for the 4 weeks that pass from the point of application to self-assessment review, when applicants may accrue additional evidence to support their self-assessment score.

Details and instructions on *how* to upload information will be confirmed by the Anaesthetic National Recruitment Office (ANRO). Please remember that all information pertaining to an application will be communicated via ANRO through Oriel. Applicants must check junk email for any communications coming from Oriel as stated in the applicant guidance.

The Royal College of Anaesthetists are not responsible for the recruitment process; however, they will post updates on their webpage and via social media as they receive them from ANRO. Any queries around any parts of the process should go directly to anro@hee.nhs.uk.

Portfolio Organisation

Applicants will be given a score for the organisation of their portfolio. The global rating score (or Portfolio Organisation Score) guidance can be found [here](#). The

score is NOT a reflection of the overall quality of the content of the portfolio but is purely a score to assess organisation of the portfolio.

Applicants must adhere to the following when uploading evidence to the online Self-Assessment portal:

- Provide ALL appropriate evidence to support your self-assessment score on your application.
- Clearly label your evidence and place in the correct domain.
- Only upload evidence that justifies the score and give the most recent and relevant evidence.
- Applicants will be marked down in the global rating score if the evidence is difficult to find, not labelled and not clear to the assessor.
- Any evidence presented should be translated into English, including letters from supervisors.
- **Candidates should ideally ensure the same name is used throughout the evidence. If you use 2 different names, make sure this is clearly explained i.e. birthname, married name etc**
- Applicants are advised that uploading more evidence than is needed or evidence that does not count towards the actual score will result in the global rating score being marked down. Using the same piece of evidence multiple times will similarly be marked down in the global rating score.
- The online portal allows the applicant to provide comments to justify their score. This has a limited word count. If the applicant wishes, they can provide an extra document to justify their score; please upload an extra word document and label it 'Domain Score Explanation' in the relevant domain with the relevant explanation. This should only contain evidence accrued between point of application and evidence upload. (see advice below regarding maximum document uploads)

General Advice

The same piece of work cannot be scored in more than 1 section (unless stated by the guidance set out below) e.g., a Postgraduate Certificate in Education – will be credited in teaching but not in Postgraduate Medical Qualifications.

ALL applicants should upload a short CV including timeline of training to date in Domain 1, whether they have additional qualifications or not. A short CV is a maximum of 3- 4 pages, outlining undergraduate and postgraduate education to date and a brief employment history. This is essential for assessors to be able to determine the years in training when scoring QI domains.

The maximum number of uploads per domain is **4 pieces** of information. Ideally put all pieces of evidence into one PDF. The only exclusion to this is Domain 3, where applicants may provide one piece of information per post.

Applicants are recommended to present their best and most recent evidence.

Applicants who have needed to provide an explanation for a change in score will be allowed one extra upload labelled 'domain score explanation'. Applicants that present more than 4 documents (or 5 including an explanation) will have their global rating score reduced by 1 point per domain.

Applicants and assessors should keep a copy of the self-assessment scoring matrix, the self-assessment guidance, and the global rating score guidance open or printed when uploading or assessing for continuous reference.

This is an example of how a domain should be scored based on the evidence:

Evidence for 4 points in Domain 1 would be.

Timeline **or** short CV, Degree Certificate for Medical Degree, evidence of MRCP pass (3 pieces **or** combine as 1 PDF).

Assessors can discuss scoring with their own regional portfolio assessors or their designated buddy marker. Any alterations in scoring should be clearly documented and state the reason for scoring adjustments and if they have sought advice by whom in their comments. If applicants have provided evidence and the assessor is unsure of the quality/or awarding organisation, the assessor should perform an internet search of the degree/ course / conference of the designated organisation to aid them in their assessment.

Applicants should go to their Educational Supervisor, College Tutor, or regional Training Programme Director for advice if they are unsure of how to score their portfolio. Applicants should follow the national process as outlined in the applicant guidance on the Anaesthetic National Recruitment Office website.

Regional/National/International is defined by the organising body - throughout this guidance, the following definitions are used:

- Regional - usually held within a single LETB or Deanery (or within a distinct region outwith the UK); Scotland, Wales and NI are single Deaneries.
- National - usually held in different parts of the UK, or anywhere within a single country (e.g. AAGBI courses, RCoA courses, OAA, Doctors Updates).
- International - held in a different country on each occasion (e.g. ESRA, World Congress of Anesthesiologists) - still considered international, even if it was held in the UK. NB Not every conference which describes itself as international is!
- The same criteria apply if a course/conference was attended online i.e. it depends whether the organising body is regional/national/international (e.g. online attendance at an RCoA course still counts as "national", a curriculum update day by a School of Anaesthesia would be "regional")

Domain 1- Additional Degrees and Qualifications

ALL applicants should upload a short CV (including timeline) or Timeline of undergraduate and postgraduate training. This allows assessors to clarify whether the degree was prior to their medical degree. **YOU SHOULD PRESENT A SHORT TIMELINE OF YOUR MEDICAL DEGREE AND TRAINING TO DATE EVEN IF YOU DO NOT HAVE A PREVIOUS DEGREE. ALL time in training and non-training posts must be included and any gaps accounted for.**

Applicants who have not uploaded a timeline should be marked down by 1 point in the global rating score for Portfolio Organisation (GRS) if this is not present.

As well as a timeline/or short CV please include certificates of all degrees.

- Undergraduate degree (prior to starting medicine) in a non-science related subject – scores 1 point.
- Undergraduate degrees (prior to starting medicine) relevant to medicine and/or anaesthesia include basic sciences, math's / statistics, social sciences, and professions allied to healthcare – scores 1 point for 2:2 or 3rd, 2 points for First or 2:1
- No points awarded for ANY intercalated degree.
- Postgraduate exams for other specialities **EXCEPT** anaesthesia and ICM, to the equivalent of MRCP, FRCEM, FRCS will be counted, including those that may have only some parts of the exam. Part 1 MRCS, MRCP, FRCEM part 1 is 2 points (3 points if candidate also has a first class BSc/BA (prior to commencing medicine). Doctors achieving a full postgraduate exam should score 4 points e.g. Full MRCP with PACES.
- DRCOG scores 1 point
- The written component of the Final FRCA or complete FRCA does not score points (or the equivalent from another country).
- Exams related to ICM do not score.
- Relevant Postgraduate Masters, Diploma, or Certificate should be awarded by a recognised Higher Education Institute with evidence of credits awarded. **(Please note, educational qualifications at PG Certificate level are given credit in the teaching section and should not be given additional credit in this section to avoid 'double counting'.)**
- A **diploma** in Tropical Medicine should score 2 points. 3 points may be given here if there is demonstration that the diploma involved a commitment of greater than one year (most Tropical Medicine Diplomas are 3 months).
- A **certificate or a diploma** in Mountain Medicine scores 3 points (*these are the same thing*). This certificate /diploma requires a time commitment of greater than 1 year therefore scores 3 points.

- Accreditation in echocardiography can be scored here: a FICE/FUSIC equivalent scores 2 points. Certificate or letter of accreditation should be used as evidence and will state they are able to perform a focused echo exam and attended the relevant courses to support this. An applicant cannot score points for attending only the echo course as part of this accreditation in this section BUT they could count the CPD from the course in section 9.
- Any applicant that is able to demonstrate British Society of Echo accreditation or equivalent (American, European) should score **3 points**. This is at least a 2-year commitment with a postgraduate examination and 110 examined echo reports with case studies. The evidence should include the accreditation certificate or official letter from the awarding organisation.
- An MD undertaken as part of **standard** anaesthetic training does not score any points (i.e., all trainees in a School (or equivalent) undertake the MD as part of their initial anaesthetic training). To be awarded 5 points, the undertaken MD should have taken at least 2 years full time (or four years part time) and required a thesis of 50-100K words (which was either original research or a body of research work).
- Points for an MD/PhD will only be given if it has been completed and the certificate is uploaded to evidence.

Domain 2 - Additional achievements, prizes, and awards relative to medicine

- Distinction for Primary Undergraduate Medical Degree: credit only if degree certificate states 'degree with distinction'. A distinction for the whole degree scores 2 points, a distinction for an aspect or component of the course scores 1 point.
- Evidence must be provided for prizes, merits, distinction for Undergraduate Medical Degrees.
- Points for high performance in a Student Selected Component (SSC) can be awarded 1 point.
- Points awarded for prizes for regional, national, or international medical organisations should be checked online by the assessor for validity e.g. The Royal Society of Medicine Hugh Wallace essay prize can easily be found on the internet for the relevant medical society (candidates should provide a website address where such awards can be validated).
- Evidence must be provided for postgraduate awards.
- Prizes awarded in Foundation Training (e.g., a certificate of merit) score 1 point.
- 4 points are awarded if you have received a Letter of Commendation or the Nuffield Prize for the Primary FRCA. No points are awarded for achieving a level of distinction in an individual component of the Primary.

An example of point scoring in this domain would be:

A trainee awarded a prize at a regional training meeting would score 3 points; award of a prize at a national meeting (e.g., the RCoA College Tutor meeting) would score 4 points.

Domain 3 - Postgraduate Clinical experience

This section does not include Foundation training during F1 or F2 years, anaesthesia experience, research experience or teaching fellow experience. The following will apply for scoring:

- Applicants will be allowed to count up to 12 months in adult ICU as complementary specialty training (excluding ICU training gained during ACCS or Stage 1 anaesthetic training). Adult ICU includes neuro and cardiac ICU as well as work in Post Anaesthetic Care Units. No more than 12 months can be counted.
- Applicants may count all time spent in Paediatric ICU in this domain. PICU would be counted as paediatric experience and outside of the total time in ICM above.
- Includes all non-training posts in the UK or Overseas by time of appointment to ST4 (includes posts entitled F3/F4, which are post-foundation).
- A holiday in Australia for example with a few weeks' work / locums would not be counted.
- A prolonged period of locum work 3 months or more where the Doctor has demonstrated learning outcomes such as Work Placed based assessments and feedback from their supervisor with a supporting letter can score 1 point.
- Evidence of placement could include - a letter from the clinical/ educational supervisor outlining the core clinical learning outcomes and time spent in post or demonstration of a logbook or suitable WPBAs or an ESSR if done on Eportfolio/LLP and a reflection on their experience OR evidence of appointment to the post (appointment letter). A letter of contract and/or a logbook are not sufficient evidence.
- If an appointment letter is the only evidence without demonstration of learning outcomes, then a max 1 point can be given.
- **All specialties** have added value to anaesthesia training, given the depth and breadth of the anaesthetic/perioperative medicine curriculum from ST4 onwards. **All** secondary care specialties and GP should be awarded points.
- Military trainees should not be penalised for having over 24 months experience and should be allowed to score the full 4 points from 19 months and up given their mandatory career path.
- To obtain 4 points the applicant should show that they have **more than 24 months and up to 36 months' experience**.
- The assessor should refer to the applicant's CV and timeline to confirm the time spent in each post.
- **All clinical experience must be documented in the CV/timeline and gaps must be accounted for.**

An example of point scoring in this domain would be:

Example 1 - an applicant has completed a Core surgical training programme and uploads their completion of Core surgical training certificate plus ARCP outcome forms from 24 months in programme would score 3 points.

Example 2 - a applicant has completed 12 months in a non-training post in Melbourne Australia, they have uploaded a letter of appointment, a clinical supervisor report from the 12 months and a logbook/ portfolio of WPBAs of their experience in ED would score 2 points.

Domain 4 - Quality Improvement

Applicants should read the information carefully to ensure they select the correct points score.

The highest points are awarded to applicants that have designed, led, collected data, and implemented changes to practice AND then re-audited their project themselves thereby closing the audit loop.

The audit/QuIP should have been presented locally. To gain points the powerpoint or similar must be uploaded.

Presentations of audit/QuIP at regional or national meetings do NOT score additional points in this section but may be given points in Domain 8.

Applicants should demonstrate work that is the most recent and their best piece of evidence. Applicants should try and avoid using projects that are over 5 (calendar) years old (7 calendar years for LTFT). If these are the **only** projects, they can be scored but assessors should reduce the Global rating score by 1 point and the QI score is reduced by 1 point, but the evidence is scored in the same way for all applicants.

Candidates should present a list of all QI / audit work undertaken as a postgraduate, but present only one or two projects which will score the highest points.

- Completing an audit loop; applicants should demonstrate involvement in initial audit and re-audit with evidence (e.g. the presentation slides showing the data). Would expect to see presentation with summary slide of key messages.
- Involvement in large Regional / National audit projects like NAP or NELA can be credited if applicant has written certificate / letter confirming significant involvement in their hospital /region as **one** of their projects.
- Audit and QI done in non-training posts is credited in the same way.
- Applicants can present a letter of evidence (template is available in the ANRO guidance). This can be signed off by a College Tutor or equivalent to confirm the contribution the trainee has made to audit/QuIP. Evidence must also include the powerpoint presentation.

- The **evidence** of audit/QI need to also be presented as suggested above.
- The timeline for training presented in Domain 1 will allow the assessor to look at whether the audit was completed in Core training or not. Please refer back to this. **The timeline /CV needs only to be uploaded in Domain 1.**
- The applicant should make their contribution to QI/Audit clear.
- Undergraduate audits score 1 point only.

An example of point scoring in this domain:

*For 3 points they should be the **sole** leader of the audit and must give evidence of their recommendations for change in practice or for closing the audit loop.*

An example of 4 points is A trainee designed a project in CT1, conducted the audit and made recommendations for change in practice. In CT2 they co designed a different audit and as a result of their findings made recommendations to change in practice. Then it was reaudited thereby closing the audit loop.

OR

*An applicant can gain 4 points if they have **led** a regional training QI or audit project.*

In addition to details of the QI they should upload a letter from their supervisor outlining their involvement in the project.

*An example of presenting evidence for 5 points is a letter from a College Tutor or supervisor confirming the QI/Audit has been done since starting anaesthetic training and confirming the applicant has designed and led the audit project themselves, presented the audit locally and then implemented changes to practice. Clear evidence of **how** the applicant has implemented the changes and then evidence of the reaudit must be provided.*

The applicant should show evidence of their audit design, a summary of the results and recommendations to change in practice AND evidence that these have been implemented by reauditing. A PDF or PowerPoint should be uploaded.

OR

*5 points can be awarded if an applicant has **LED** a national training QI/audit project.*

Evidence must clearly show their role in the project with presentation of the results and recommendations to change in practice. This is best evidenced by a letter from a supervisor outlining their involvement.

Domain 5- Research

This excludes research from a PhD course or MD (these are scored in Domain 1).

This excludes involvement in National Audit/QI Projects; these are scored in Domain 4.

The maximum points scored in this section are to those doctors who have demonstrated a significant commitment to research during their anaesthetic training or between core and Higher training.

- A Post Graduate MSc in Sports and Exercise Medicine can count as a generic research project but not as a degree relevant to anaesthesia.
- Trainees providing evidence they are an associate PI for an NIHR project may score 3 points.
- A letter from a clinical research supervisor in an academic or training department outlining the depth of involvement in research is a good way to demonstrate research involvement.
- A letter acknowledging PI/CI / associate PI status or joint grant holder.
- Demonstration of research contributing to an MD that has not been scored in Domain 1 or 5.
- Research publications are scored separately.
- Involvement in large national audit projects e.g. NAP, NELA do not count in this section but may be given points in domain 4.
- Research related to postgraduate medical education is excluded in this domain, but the applicant may be able score additional points in domain 7 if their work has been published.

An example of point scoring in this domain:

A trainee's training timeline shows they have been in a clinical fellow research post for the last 12 months. They have uploaded a letter from their clinical/academic supervisor stating they have developed their own original research project that has gone through R+D/ethics scrutiny, collected the data and performed the write up as well as recruit to a NIHR portfolio study with a list of the skills they have developed. This would score 4 points.

Domain 6- Teaching

Guidance notes for teaching:

- A 'major contribution' to a local, regional or national teaching programme including organising a programme refers to **a series of teaching events** (not just one lecture or 1 event) e.g. a whole day of multiple speakers repeated across the year OR a series of weekly sessions etc. The designed sessions must be delivered (not just planned for the future).
- Postgraduate Certificates, Diplomas or Masters in Education must be completed by submission of self-assessment, with evidence of credits awarded by Higher Education Institute. **This should not have been scored in Domain 1.**
- Designing an online/virtual teaching package scores 4 points if substantial (e.g. multiple sections) and available regionally/nationally.

- 'FRCA national exam teaching' – this is a new online teaching course screened worldwide but non peer reviewed. Scores 1 point if 1-4 sessions delivered, 2 points for 5 or more sessions. The same applies to a number of online lectures delivered as part of an online platform.
- Informal teaching of medical students scores 1 point, regardless of the number of students present (evidence MUST be submitted e.g. PowerPoint presentation, feedback).
- Formal teaching of medical students – i.e. organising a course for medical students through the University – is a local teaching programme (not regional) - scores 2 points.
- To gain additional points for Regional or National teaching programmes the applicant must include further details to justify the score. Please supply a letter from your supervisor stating that attendees were from outside your Trust or give evidence of how this qualifies as Regional/National.
- Presenting an audit project is not scored in this section nor presenting own research etc. at a meeting.
- A whole study day organised by the trainee can score 2 points with evidence they delivered a topic in it.
- Attendance at Teach the Teachers course/Generic Instructors course either can count in either domain 6 or domain 9 but not both.

Domain 7- Publications

Publications should be peer reviewed. **Given feedback on the self-assessment we have removed the time limit of 5 years as it was deemed not relevant. Please score all publications. All publications (or a link to the publication) must be uploaded to be scored.**

- Publication of a poster abstract following presentation at a meeting does not score here. Marks should be awarded for poster presentations in Section 9 (Presentation and Poster presentations).
- Publications that involve audit / QI projects which have been awarded points in section 5 **can be awarded additional points** here if the work is PubMed listed or peer reviewed.
- To check if an article is PubMed listed go to <https://pubmed.ncbi.nlm.nih.gov/> and then search for either the title of the publication or by the author's name.
- **If an article is NOT PubMed listed, applicants must provide additional evidence demonstrating the publication is peer-reviewed (this evidence with the article counts as a SINGLE piece of evidence)**
- Open access electronic full publications can count if they are PubMed listed or peer reviewed.
- Case reports in an electronic publication such as e-BMJ Case Reports should count for a total of one point only, even if multiple case reports have been published.

- Chapter(s) in commissioned books score 4 (first author) or 3 (Co-author) Author of a book chapter score 2 points.
- Publications in student journals (e.g., student BMJ) score 1.
- Applicants need to show evidence of the publication (e.g., photocopy/PDF of the title page, printout of a literature search showing the reference, or a link so that assessor can upload the relevant journal article).
- Written work as part of a PG Certificate of Education (or similar) do not gain additional points in this section unless this has led to a peer-reviewed publication.
- Publications in a peer-reviewed journal of work undertaken at an undergraduate level (e.g., intercalated degree) may score points.

Scores cannot be counted for being a co-author of participating site publications of projects such as NAP, NELA where there is a long list of authors (**unless applicant has a written certificate or letter confirming significant involvement in their hospital / region and they were involved in the actual write up**). Score 2 with this evidence. Involvement in data collection for large multicentre projects is scored in Domain 5.

Domain 8 - Presentations; oral and poster

- Applicants must upload a copy of the poster and/or powerpoint presentation to score points in this Domain.
- Presentations relating to publications awarded marks in Domain 7 are **excluded**.
- Presentations as part of 'additional degree programmes' are **excluded**.
- Presentations of audit/QI may be scored here.
- For Regional/National/International presentations, the applicant will need to show evidence of where the presentation occurred (not just the PowerPoint slides) e.g., printout of the meeting, programme which identifies them as the speaker, letter of acceptance, conference or abstract etc, OR a certificate of attendance which describes the presentation. Evidence must clearly demonstrate how this qualifies as a Regional/National/International presentation.
- For local presentations, PowerPoint slides are sufficient in PDF format.
- Undergraduate presentations do not score any points in this section.
- Presentations of original research, which lead to PhD/MD etc. may have already scored points in section 1. They should not be counted as presentations in this section. We are specifically looking at presentations during postgraduate training from FY1 to current level.
- Teaching presentations are excluded here (credit in section 6).
 - 'I have presented at a regional, national or international meeting': it does not matter where the meeting was held - it is the organising body which counts as 'International' etc., so ESICM is an international body even if it were to hold a meeting in Birmingham. Similarly, a national meeting would be organised by a national body e.g., AAGBI, RCOA, ICS, ASME etc. 'Regional' implies a meeting of a regional organisation

e.g. SASWR, NEICS (even if held in the hospital where the trainee was working at the time) or a Deanery wide level.

- Presentations as part of deanery *teaching* for regional trainees, teaching for foundation trainees or medical students are **not** counted in this section but can be counted in Section 6 (Teaching).
- **Poster presentations at Regional meetings all score 3 points / Poster presentations at International/National meetings all score 4 points** (including a 5 minute oral presentation of a poster at AMEE, ESA, ESICM where all posters are presented in this way). To score additional points for oral presentations which suggests they were the top abstracts submitted, applicants should provide evidence they have presented in front of an audience of conference delegates (includes virtual conferences) as part of the conference programme. Please score the oral presentations as per the scoring matrix (Domain 9) but regional, national and international poster presentations should score 3/4 as stated above. As noted above, a copy of the poster must be included.

Domain 9- Continuing Professional Development

Educational events attended must be of at least 1-day duration current at the time of interview and within the last 5 years.

Courses that are mandatory for appointment do not count.

- For 1 point - applicants must be able to demonstrate that they have undertaken mandatory training in their current or most recent placement. Evidence could include a certificate or a printout of their completed mandatory training dashboard, or a Letter of Evidence from an applicant's Educational Supervisor.
- Applicants can still gain points in this section if they are unable to demonstrate any mandatory training, but they will have their score reduced by 1 point e.g. an applicant submits a certificate demonstrating they attended an obstetric update lasting one day. This would normally score 2 points but as no evidence of mandatory training has been uploaded then their score for this domain is 1 point.
- Mandatory training for IAC/IAOC must NOT be included as Core Mandatory Training.
- ALS, ILS, ALS 2 (an advanced life support course run by the Australia Resuscitation Council), ALERT or any course required for foundation training **does not score points**.
- APLS and ATLS **do count** as an educational event - they are outside of mandatory requirements for appointment at this level.
- Any meeting or conference relevant to anaesthesia or ICM may be credited here.
- Online educational events should be credited if applicant can present relevant certificate and course information with detail of the time/commitment spent doing the course.
- exam courses (including revision courses) do not score points.

- if an attendance certificate does not state the length of course (or the number of CPD points), it **MUST** be accompanied by a course programme (this evidence will count as a **SINGLE** piece of evidence for this Domain).
- for 4 points - if the attendance certificate does not state the course is related to simulation/regional anaesthesia, it **MUST** be accompanied by a course programme (this evidence will count as a **SINGLE** piece of evidence for this Domain).
- For 4/5 points only one educational event needs to be of greater than 1 day duration.
- For 4/5 points one of the educational events attended must relate to regional anaesthesia or simulation. Many local, regional, and national courses include simulation and can count e.g. a one-day local obstetric simulation day or a local trauma simulation day can be used as evidence. Similarly ATLS, APLS, EPALS etc all contain simulation and count. However, simulation training as part of the IAC/IAOC must not be included in this Domain.

This is an example of how an applicant could get the maximum 5 points in this domain

- *Evidence of completion of core mandatory training (e.g. screenshot from website or Letter of Evidence from Ed Sup)*

AND

- *Certificate of attendance at one day human factors course*

AND

- *Certificate of attendance at ultrasound guided regional anaesthesia course*

AND

- *ATLS certificate (national course more than 1 day duration simulation based)*

All course certificates must be in date.

Given the limitations on in-person educational events during COVID 19, educational webinars and conferences will be accepted as evidence. To score 1 point, webinars (or multiple webinars combined) will need to demonstrate at least 7 CPD points. 2 points 14 CPD points etc. Suggest applicants combine the attendance certificates from the webinars into one PDF.

Domain 10- Activities Outside of Medicine

This section can include activity current **at the time of entry into medical school** and any time thereafter. Leadership during school years does not count in this section.

- 1 point; Active membership should include more than simply being a member of e.g., a sporting team or orchestra. It should involve extra responsibility within the group e.g. secretary, treasurer.
- 1 point; Teams within the hospital should not include e.g. simply leading a cardiac arrest team, but could include additional responsibility such as coordinating or influencing that service i.e. rota coordinator.
- 1 point; Doctors who have significant commitment outside of work whether it be caring for relative or children that places significant burden on their time outside of work.
- 2 points; demonstration of leadership as an undergraduate NOT postgraduate.
- 3 points; the applicant should provide evidence for organisation and leadership e.g. a leadership fellow role.
- Trainee representation on a regional committee scores 3 points.
- 4 points; the applicant should produce evidence for what constitutes exceptional commitment in this domain. This may involve confirming how long the commitment lasted for and the responsibilities of the role. (exceptional sporting, volunteering, leadership commitment can be scored here) .
- Trainee representation on a National committee e.g. RCoA Council or committee member scores 4 points.
- Being audit/QI lead does NOT count as leadership in this section (and should not score points in this Domain).

An example of scoring in this section would be:

A trainee has uploaded a letter from their HOS stating they are the regional LTFT training representative on their regional training committee would score 3 points.

A trainee has uploaded a letter from their College Tutor saying they have organised the Trainee rota for 1 year would score 1 point.

A national leadership role such as representative on a national committee such as the AAGBI or RCoA or equivalent scores 4 points.