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Health Education and
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GP PRACTICE MANAGER HANDBOOK FOR GP TRAINING

Health Education and Improvement Wales (HEIW) is responsible for workforce planning, and the education and training of the NHS workforce in Wales. This includes both medical and non-medical members of staff. The GP Section of the Medical Deanery in HEIW is responsible for the management of GP Training across Wales. Further information about the work of HEIW is available here [Home - HEIW \(nhs.wales\)](https://nhs.wales)

This handbook is for the use of practice managers in GP training practices. From time-to-time amendments will be made and a summary of these changes will be provided at the start of the handbook. Existing practice managers who have previously read the handbook will only need to review the changes that have been made.

Changes for 2023

Section 8 - Unauthorised Absence

When sick notes are not provided by the GP Trainee within 7 days it should be recorded as unauthorised absence and practices are required to report any unauthorised absences to shared services.

Section 12 - Annual Leave and/or Study Leave

Trainees must maintain the ratio of clinical/educational sessions during their working week regardless of whether it is annual leave or study leave. FAQs are provided on this.

Further information on self directed learning (SDL) has also been added to this section.

Section 18 – GP Trainers Grant

Practices will continue to receive the trainers grant whilst a trainee is on parental leave.



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1. NHS Wales Shared Service Partnership (NWSSP) Single Lead Employer (SLE)

Since February 2015 all GP trainees in Wales have been employed under a single lead employer arrangement. This means that the GP Practice is now a host organisation and therefore does not employ GP trainees.

2. Allocation of Trainees to GP Practices

The allocation of GP trainees to practices is organised by the Scheme GP [Programme Directors](#). Once the final allocations are confirmed, these details are uploaded onto the INTREPID information system. The single lead employer for GP trainees, NHS Wales Shared Services Partnership (NWSSP), will formally notify the practice manager approximately 4 weeks prior to the placement starting, which trainees have been allocated to the practice. Any subsequent changes to this will also come from the single lead employer. If you haven't received details of the GP Trainee to be placed with you or you receive differing information to what you were expecting, please [Contact Lead Employer - NHS Wales Shared Services Partnership](#) in the first instance.

3. Practice Checks

Prior to a GP trainee starting in your practice, you will receive an Employee Front Sheet from the lead employer. This will confirm all the pre-employment checks that have been carried out by them for example:

- GMC Registration
- MPL Inclusion
- DBS Check
- Medical Indemnity – top up
- Annual Leave
- Study Leave

It will also provide details of any leave entitlements the trainee will have whilst in post with you,

Depending on individual practice policies, you may wish to carry out additional checks or to re-confirm the checks that have been carried out.

4. Training and Assessment

The training week for a GP trainee will be a mixture of service and learning. Full time GP trainees will undertake 7 clinical (surgeries, clinics) and 3 educational sessions (i.e. a tutorial, a self-directed learning session and attendance at the half day release). A session is counted as 4 hours.

Over the whole of their three-year programme, GP trainees need to demonstrate that they are achieving the learning outcomes of the GP curriculum. They will demonstrate this by means of a series of workplace-based assessments which are recorded in their electronic learning log, the Portfolio. The assessments and the Portfolio are defined by the Royal College of General Practitioners (RCGP) and will largely be carried out by the GP Trainer. In addition, there are assessments that will involve patients feeding back about the GP trainee (Patient Satisfaction Questionnaire) and feedback about the GP trainee from other members of the team (Multi-Source Feedback). These latter two may involve Managers in some co-ordination of the process with instructions given via the portfolio.

GP trainees in their hospital posts will be supervised by GP Trainers who will act as an Educational Supervisor to them.

5. A Guide to Less than full time training (LTFTT)

The following information should act as a guide when working out rotas for trainees working LTFT:

<p>100% (40 hours/ week) Working ten sessions weekly Each week rota as follows: 7 clinical sessions + 3 educational sessions</p>
<p>80% (32 hours/week) Working eight sessions weekly Five week rolling rota as follows: 3 weeks: 6 clinical sessions + 2 educational sessions 2 weeks: 5 clinical sessions + 3 educational sessions</p>
<p>70% (28 hours/week) Working seven sessions weekly Ten week rolling rota as follows: 9 weeks: 5 clinical sessions + 2 educational sessions 1 week: 4 clinical sessions + 3 educational sessions</p>
<p>60% (24 hours/week) Working six sessions weekly Five week rolling rota as follows: 4 weeks: 4 clinical sessions + 2 educational sessions 1 week: 5 clinical sessions + 1 educational session</p>
<p>50% (20 hours/week)</p>



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Working five sessions weekly
Two week rolling rota as follows:
1 week: 3 clinical sessions + 2 educational sessions
1 week: 4 clinical sessions + 1 educational session

Further information on LTFTT can be found here - [LTFT - HEIW \(nhs.wales\)](#)

6. Flexible working policy

For requests to vary the normal working week to take into account things such as commuting distances or child care issues, the Velindre NHS Trust (NWSSP) Flexible working policy and procedure should be referred to [Policies and Procedures - NHS Wales Shared Services Partnership](#) This should be requested from the single lead employer - [Contact Lead Employer - NHS Wales Shared Services Partnership](#)

Please note: Trainees wishing to increase or decrease their working hours need to apply for less than full time training via HEIW - [LTFT - HEIW \(nhs.wales\)](#)

7. NADEX Accounts for Trainees

A monthly report is run by HEIW that lists all trainee doctors that are rotating the following month. This report is sent to Digital Health and Care Wales (DHCW) who arrange for their accounts to be moved to their new place of work.

If there are any problems when your trainee starts with accessing your practice IT systems, please contact:

DHCW Primary Care Service Desk on 0333 200 8048. Lines are open 8am to 6pm Monday to Friday and 9am to 1pm on Saturday.

To log a call via email: primarycare.servicedesk@wales.nhs.uk

For any queries regarding the Welsh Clinical Portal please use the above contact details.

8. Sickness Absence

Where sickness absence totals more than 14 working days (including any weekend) during a training year, the period in training should be extended by up to the equivalent period to allow completion of training. It is therefore important that accurate sick leave is recorded, and the lead employer is informed in the monthly returns. This information is then fed through to HEIW in order for training programmes to be extended where necessary.

The single lead employer will send Practice managers a monthly excel spreadsheet to complete. There is a worksheet tab titled "Absence Guidelines" to help you complete the sheet. **If there have been no absences, you should email the designated email address to confirm this is the case.**

Practice managers can forward the monthly returns regardless of whether the return to work has been completed or not, the return to work paperwork can be sent in at a later date. However, all sickness absences MUST have a return to work completed as soon as feasibly possible to their return date and any Special Leave requests MUST have an application form.

Please note that if the trainee is near the end of their training and goes off sick the lead employer should be notified immediately rather than wait until the return is sent.

The SLE will also require copies of all GP Fit notes where applicable (absences longer than 7 calendar days) and all of the above must be emailed to the SLE team - Absence@single-lead-employer.zendesk.com . This can be done when the returns are submitted or as and when they are completed.

Further information on sickness absence can be found here:
<https://nwssp.nhs.wales/ourservices/lead-employer/gp-specialty-registrar-documents/policies-and-procedures/nhs-wales-sickness-policy-1/>

Unauthorised Absence

Please be aware that ALL trainees must provide a sick note before the self-certification window of 7 days and must inform the Practice of their absence. The NHS policy is clear that without a sick note they will define this as unauthorised absence. Practices should report unauthorised absences to shared services, who will contact the trainee for a 'welfare check', if the absence is deemed unauthorised their **sick pay will be stopped**. Taking unauthorised absence is unprofessional behaviour. HEIW would expect an 'Educators' Note recording the unauthorised absence so that it can be considered as evidence by an ARCP panel.

9. Maternity/Shared Parental/Adoption Leave

All the information on these types of leave can be found on the lead employer's website here: <https://nwssp.nhs.wales/ourservices/lead-employer/general-information/hr-forms-and-processes/>

10. Special Leave

Information regarding special leave can be found on the lead employer's website here: <https://nwssp.nhs.wales/ourservices/lead-employer/general-information/hr-forms-and-processes/>

11. Annual Leave

The lead employer is responsible for trainee annual leave entitlements. The amount of annual leave a GP trainee has will be communicated to you from the lead employer via the Employee Front Sheet. You should expect to receive this prior to the trainee starting at your practice. It is your responsibility to approve annual leave requests and to keep a record of this. Any queries on a trainee's annual leave please [Contact Lead Employer - NHS Wales Shared Services Partnership](#)

12. Study Leave

The GP Trainee Study Leave process is coordinated from the GP Training Section in HEIW. Your role within this is to approve the time out of practice for the GP trainee to attend the course. Further information on study leave can be found here: [Study leave - HEIW \(nhs.wales\)](#) When GP Trainees are in a General Practice post, GP Practice Managers are expected to keep a record of the number of sessions that GP Trainees request to take off for Study Leave.

Study Leave and/or Annual Leave

When trainees book time-off regardless of the reason (whether it's annual-leave or study-leave) **the trainee should be maintaining the ratio of clinical/educational sessions during their working week.**

Trainees should NOT try to book half-days off in an attempt to reduce the number of clinical sessions they are working whilst maintaining the number of SDLs etc.

When trainees take leave during the week the ratio of clinical: educational sessions should be maintained with flexibility being exercised by both the practice and the trainee when required. A suggested and appropriate balance for any given week might be:

- 5 Day working week: 7 clinical: 3 educational sessions
- 4 Day working week: 6 clinical: 2 educational sessions. * Go to appendix 5
- 3 Day working week: 4 clinical: 2 educational sessions



- *2 Day working week: 3 clinical: 1 educational session*
- *1 Day working week: 2 clinical: 0 educational sessions*

(Or the pro rata amount for those trainees in LTFT placements).

Frequently asked questions on study leave can be found in appendix 5

13. Self-Directed Learning (SDL) for GP Trainees

Doctors in postgraduate medical training (and throughout their careers) are adult learners and need to have opportunities to identify and direct their own learning. SDL sessions in General Practice training offer the opportunity for trainees to consider their learning needs and to have time to explore some of those which have been identified.

Trainees often join GP training from a variety of clinical backgrounds, the specialty is so wide ranging, and, of necessity, hospital experience is limited, so SDL offers the opportunity to spend time 'tasting' other specialties and exploring wider clinical areas. It also gives space for quality improvement activity, audit and research, and time to work on the portfolio or exam preparation. Further information can be found in Appendix 6.

If you have any further queries on study leave, please contact HEIW.gptraining@wales.nhs.uk

14. GP Trainee mileage claims "Home to HQ"

GP trainees can only claim their commute from home as 'GP home to HQ' on the days when their journey to work includes a house visit or other trip for work purposes that is outside the usual place of work (such as attendance at the Half Day Release (HDR) or a branch surgery) which is classed as business mileage. Mileage is capped at 20 miles per day. When making the claim, there should be 2 entries for the same date to help indicate why the GP Trainees is making a GP home to HQ claim: the second entry being a 'business mileage' entry. In the case of a trainee claiming their journey to weekly HDR teaching, they must enter 2 items as 'GP home to HQ' and then also add a 'business miles of HDR'.

Trainees should not be claiming mileage for travelling home to their practice if there was no onward journey on that day that was required for business purposes.

Study Days – miles being claimed should come under study mileage, not business mileage. Practices are expected to verify the dates of these submitted claims by their trainees to ensure they correspond to those dates that the trainee attended a house visit, branch surgery, HDR etc. All queries related to trainee expense claims can be directed to

NWSSP.TrainingGradeExpenses@Wales.nhs.uk

15. Out of Hours

In Wales, the 40-hour GP trainee daytime contract remains in place and trainees are still expected to complete a minimum of 36 hours of OOH work per 6-month general practice post. It is important that trainees do not exceed the European Working Time Directive and have a minimum rest period of 11 hours between work periods. Until recently trainees have been advised to undertake shifts that finish at 10pm (4 hours in length) to ensure a sufficient rest period before surgery the next day. From 1st August 2019 the Medical Deanery has agreed that trainees can undertake longer OOH shifts and finish at midnight providing they give their practice sufficient notice (normally 6 weeks) to enable their surgery start time to be rearranged and providing the OOH provider can accommodate their longer shift. Please note, trainees arrange and book their own shifts with the OOH providers and the expectation is they work with their practice to ensure any booked sessions fit into their practice rotas.

Additional Work

GP trainees **must** seek permission in advance from their Educational Supervisor before they undertake any additional work outside their GP Training Programme e.g. locum shifts in hospital or acting as a doctor for a sports club.

16. Practice Complaints involving your GP Trainee

Under the Lead Employer arrangement, a GP trainee will be covered by the Welsh Risk Pool for the duration of their employment. However, it is the responsibility of the GP trainee to obtain appropriate indemnity to cover instances involving criminal proceedings and Good Samaritan acts (the top-up element).

If you receive any formal complaints where your GP trainee is named and you have not been able to resolve this at Practice level, or where you judge there is a significant risk of the complaint not being resolved you must let the Lead Employer and provide the details of this complaint. Please [Contact Lead Employer - NHS Wales Shared Services Partnership](#) They will then discuss this

with NHS Wales Legal and Risk who govern the Welsh Risk Pool that indemnifies GP trainees.

All information on medical indemnity for GP trainees can be found at [Medical Performers List and Medical Indemnity - NHS Wales Shared Services Partnership](#).

Further information can also be found [General Medical Practice Indemnity \(GMPI\) - NHS Wales Shared Services Partnership](#)

17. Quality Management in GP Training

The General Medical Council (GMC) is the statutory organisation responsible for the delivery of good quality medical training and education for all doctors in postgraduate specialty training. It sets criteria for the delivery of training, and for trainers, and approves specialty curricula. It is the body that approves GP training programmes and posts and GP trainers.

In Wales, we have developed an online system to monitor the delivery of training in GP practices, the Trainer Re-Accreditation Process (TRAP). Each practice is required to nominate a lead trainer. Every 3 years (usually in January) the practice manager will be sent a web link to an online training status monitoring questionnaire. **This link is sent to the practice manager direct email address.** The practice manager is expected to update the information about the practice and then after discussion with all trainers in the practice nominate a lead trainer to complete the survey. However, it is expected that all the trainers in the practice will complete this together. At the same time a web link to separate online questionnaires are sent to the Programme Director(s) and GP trainees in the practice.

Please note that trainees are still expected to complete the survey yearly.

HEIW will contact the practices that are involved in TRAP about a month before the TRAP round to confirm they are expected to take part and when to expect the survey.

Routine formative practice visits are made to training practices every five years. However, it may be necessary to undertake a visit to a training practice before five years has elapsed.

If you would like a full copy of the Approval and Monitoring of GP Trainers and GP Training Practices in Wales, please email HEIW.gptraining@Wales.nhs.uk

18. GP Trainer Resignation/Retirement

When an approved trainer leaves the practice or resigns as a trainer leaving only one approved trainer remaining, the practice has two years from the date the trainer resigned/left to get a second approved trainer in place. The reason for having a minimum of two trainers in a practice is that it offers good support and

supervision arrangements for trainers and for doctors in training, particularly where the trainee and/or trainer may be experiencing concerns with the way the training is progressing.

Please notify the GP Training School (heiw.gptraining@wales.nhs.uk) in good time so that the local Associate Dean can consider prioritisation for the next available Prospective Trainers Course (PTC).

19. Funding available to Trainers and Training Practices

GP Trainers Grant

This payment is administered via the lead employer. Any queries regarding this please [Contact Lead Employer - NHS Wales Shared Services Partnership](#) . Please note that practices will continue to receive the trainers grant while a trainee is on parental leave.

CPD Funding payable to GP Trainers - £750 annually

The GP Trainer CPD payment is an annual one-off payment to all approved GP Trainers as of 1st April each year. It is in recognition of CPD activities they have undertaken in relation to maintaining their status as a Trainer. The GMC delegate responsibility for the process to approve GP Trainers to HEIW. Details of all approved GP trainers in the UK are held by the GMC and HEIW is required produce regular data about GP trainers.

To remain on the list of approved GP Trainers held by the GMC, Trainers need to have been the named Educational Supervisor for a GP trainee at least once in a 3-year period and maintain their educational activity as a Trainer. The CPD payment will thus be made only to GP Trainers who are approved on the 1st of April each year. GP Trainers whose first-time approval is confirmed after the 1st of April will not receive the funding until the following year.

Payment is made annually, within an agreed timescale, on completion of the appropriate claim form to those Trainers who meet the criteria and should be paid directly to the Trainer and not the GP Practice.

This payment is administered by the GP Training School. Any queries regarding this payment should be sent to HEIW.gptraining@wales.nhs.uk

Educational Supervisor Funding for supporting ST1 and ST2 trainees in hospital posts - £479 per trainee per 6 months on receipt of an Educational Supervisors Review.

In order to claim this payment, the trainer is expected to meet with the trainee throughout their hospital placement to ensure that their educational learning and development is being met and that assessments and reviews are being completed in a timely fashion. The claim form can be found below.

<https://forms.office.com/e/mdixbg4Bkx>

Appendices

20. Appendix 1

Who's Who in The GP Training School

The Responsible Officer for all doctors in training is the Medical Director of Health Education and Improvement Wales (HEIW), Dr Push Mangat.

The Dean for Postgraduate Medical and Dental Training in Wales is Dr Tom Lawson.

The Director of Postgraduate GP Education is Dr Colette McNally.

The Deputy Director of Postgraduate GP Education is Dr Alistair Bennett.

Each of the 11 GP Training Schemes has a GP Associate Dean and GP Programme Directors ([Contact details - HEIW \(nhs.wales\)](#)) who are responsible for the efficient running of the training provided.



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21. Appendix 2



22. Appendix 3

A brief overview of a GP Trainee's Journey

Following graduation from Medical School, newly qualified doctors undertake two years in a Foundation Programme (F1 and F2). Although this is largely undertaken in hospital posts, about 35% of trainees in the second year of the programme (F2) will undertake a 4-month placement in a GP placement. In 2020 HEIW launched the Longitudinal Integrated Foundation Training (LIFT) programme. This offers F1 doctors the opportunity to be released from their hospital post into a GP placement for 1 day per week throughout their F1 year.

Trainees successfully completing the Foundation Programme will be eligible to apply for Specialty Training. Those trainees who are successful in an application for GP training will undertake a three-year training programme composed of hospital posts and placements in GP. The time spent training in a GP placement will be at least 18 months. If your practice would be interested in finding out more about providing placements to Foundation doctors please contact - HEIW.gptraining@wales.nhs.uk.

23. Appendix 4

Useful Contacts

GP Training Team – HEIW.gptraining@wales.nhs.uk

Single Lead Employer – [Contact Lead Employer - NHS Wales Shared Services Partnership](#)

Useful Websites

Single Lead Employer - [Lead Employer - NHS Wales Shared Services Partnership](#)

HEIW - [GP training - HEIW \(nhs.wales\)](#)

RCGP - [Training \(rcgp.org.uk\)](http://rcgp.org.uk)

24. Appendix 5 - Frequently asked questions – GP Study Leave

- What if the trainee doesn't book time off but there's a Bank Holiday?

*If trainees are not booking any time-off but there happens to be a *4-day week due to Bank Holiday Monday*, then a full-time trainee should be working 6 clinical sessions and 2 educational sessions in that week. If HDR has not been cancelled in that same week, then one of the 2 educational sessions will be HDR, leaving the remaining educational session to be EITHER an SDL or a tutorial

session...whichever suits is to be agreed with the ES. If there is no HDR on, then this session can be taken as SDL.

- A trainee requests to take 3 Thursdays off in a few months' time, what does a trainee need to do?

The trainee will need to liaise with their practice manager in order to adjust their working pattern for the remainder of that week that the trainee is in work. In this example, trainees will be in work for 4 days in those weeks, of which there should be 6 clinical sessions and 2 educational sessions (e.g., HDR and either an SDL session or a tutorial session). If a trainee is less-than-full-time (LTFT) then these sessions are adjusted pro-rata to maintain the ratio set out above.

- How much notice does a trainee need to give to book leave?

Trainees need to be professional and mindful of the impact and potential disruption caused upon the practice team when trainees attempt to book leave at short notice. Trainees should discuss local arrangements in their practice but the standard notice-period for booking leave is usually around 6-8 weeks.

- Do trainees need to do anything different if booking study leave?

All study-leave requests need to be approved by the trainee's educational supervisor first before asking the practice manager to book it.

- The educational supervisor has told the trainee that they need to do a clinical session instead of an educational session, should they agree?

If there are certain clinical skills or capability areas that a trainee needs to develop, then it is usually of significant beneficial value from a training-perspective to be seeing more patients. If the ES feels that a trainee would benefit from using some educational sessions to do clinical work, then trainees are encouraged to be professional and respect this. The work-place training experience is very valuable; whilst two thirds of training requirements are to pass the AKT and RCA/SCA, the remaining third is on the skills trainees develop and demonstrate in the workplace. A trainees portfolio needs to be evidencing competency in all capability areas in order to complete their training.

- How much Study-Leave can a trainee take?

In a 6-month GP practice placement post, trainees are entitled to 7 sessions of study leave. This is the allowance IN ADDITION to the half-day release (HDR) sessions. Trainees should also remember that attendance to HDR is considered

mandatory as it's a contracted part of the working-week (i.e., they are being paid to attend!).

- The educational Supervisor isn't sure if the course a trainee wants to do is suitable for booking off as study-leave.

The Study-leave guidance policy can be found here – [All Wales study leave policy for doctors and dentists in training \(nhs.wales\)](#) this will hopefully provide further clarity, pages 4-5 lists some examples of acceptable vs. unacceptable use of study-leave. Trainees can also ask the programme directors if their query isn't covered by this document.

- How much private study-leave can a trainee take?

Leave for private study is usually taken to prepare for exams such as the AKT. Private study leave is limited to maximum of 5 sessions per 6-month training post (or 5 days in a 12-month training post) and *this is deducted from the study-leave allowance*. No expenses are claimable for private study-leave.

- Can a trainee use study-leave to do locum work?

Absolutely NOT! Trainees should not undertake any paid employment or remunerative work during any period of study-leave (or sickness leave). Infringement of this rule is a disciplinary offence and can be interpreted as fraudulent behaviour that can lead to being removed from the GMC register.

- Can a trainee claim-back if they were off-sick when they were meant to attend a course that had approved study-leave?

Potentially not a straightforward answer and the trainee should consult the NHS All-Wales Sickness Policy and seek advice from the single lead employer NWSSP.

25. Appendix 6 - Guidance on Self Directed Learning (SDL) sessions

Importance

Doctors in postgraduate medical training (and throughout their careers) are adult learners and need to have opportunities to identify and direct their own learning. SDL sessions in General Practice training offer the opportunity for trainees to consider their learning needs and to have time to explore some of those which have been identified.

Trainees often join GP training from a variety of clinical backgrounds, the specialty is so wide ranging, and, of necessity, hospital experience is limited, so SDL offers the opportunity to spend time 'tasting' other specialties and exploring wider clinical areas. It also gives space for quality improvement activity, audit and research, and time to work on the portfolio or exam preparation.

How much

One session each week (four hours) is allocated to SDL for a full-time trainee. Those who are LTFT will have sessions averaged over several weeks, for example a trainee working 80% would get four sessions every five weeks.

Usually, SDL will be a fixed session each week, but swaps may be arranged by mutual agreement of trainee and GP Educational Supervisor (ES). Similarly, if needed, two sessions could be aggregated if the trainee arranges for a whole day activity.

SDL sessions are not study leave but part of the working week, they also form part of the holiday calculations. Trainees should take annual leave in the same education/clinical work ratio as their normal working week (3sessions /7 sessions) and may not selectively take clinical sessions. When the Half Day Release is not running, for example during the summer holiday, trainees should use the freed session for SDL.

GP practices and trainees will need to have a flexible approach in deciding when SDL occurs, especially when there are multiple trainees based in the practice. This may mean that SDL sessions for individual trainees will need to be staggered throughout the week rather than occurring in a single morning or afternoon. This will allow for room optimisation and better service coverage.

For trainees who are attending the Programme for Additional Specialised Support (PASS), these extra teaching sessions will come out of the SDL allowance (when in a GP practice post).

Planning and Content

As an example Swansea Bay Training programme has a useful list (but Swansea based) of ideas for using SDL see: <http://generalpractice.life/useful-sdls/> Essentially, these include hospital clinic visits, community services, special services such as CAMHS, Minor Injuries and acute GP services. What is available will depend on the local area.

SDL may also be used for work on the portfolio and other activities as mentioned above. SDL activity should always be discussed with the ES.

Location

Much SDL, such as clinic visits, will be outside the practice. When working on patient identifiable information consideration should be given to information governance and, unless appropriate IT such as a practice laptop computer is available, this should be done on the practice premises. All SDL sessions are to be conducted either in practice or at a pre-arranged clinic and are only to take place at home **only with prior agreement, and at complete discretion of the Educational Supervisor**. The SDL should be recorded in the portfolio as evidence that it took place.

Where a trainee is placed in a practice distant from their base and the Postgraduate Centre, consideration should be given to arranging the SDL on the same day as the HDR so unnecessary travel to the practice is avoided.

Reflection and Recording

Trainees are encouraged to reflect on all their SDL activity. It is important that SDL is recorded in the portfolio with a suitably descriptive log entry.