10.7861/fhj.8-1-s21 COVID-19

COVID self-certification: recognition of postgraduate training and experiences gained during the pandemic

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Introduction

The COVID-19 pandemic has placed significant pressures on healthcare services and professionals delivering patient care. Consequently, postgraduate medical training has been interrupted, with limited opportunities for supervised workplace-based assessments. Therefore, additional knowledge and skills gained, particularly those outside the scope of respective training curriculum, may not be robustly captured. This project aimed to identify trainees' views on additional capabilities gained during the pandemic and the value of self-certification, in order to inform the design of a COVID self-certification template.

Methods

A SurveyMonkey[®] questionnaire was emailed to all postgraduate trainees in the East Midlands and Wessex deaneries. The survey was also disseminated via rota coordinators within surrounding NHS trusts. Data collection occurred between 1 and 20 July 2020.

Results and discussion

A total of 778 trainees completed the survey. Responses were equally split between both deaneries and represented a range of specialties (Fig 1). The majority of respondents were registrars (35%), followed by foundation trainees (25%), core trainees (23%), general practice trainees (12%), trust grade/fellows (3%) and 'others' (2%).

On analysis of free-text data, additional skills gained were categorised, in order of decreasing frequency, into: clinical (diagnostics, escalation of care, general medical knowledge, invasive and non-invasive ventilation); challenging communication; remote consultation; infection control (donning and doffing of personal protective equipment); procedural (chest drain, arterial and central line insertion); leadership and management (rota planning, guideline and service development); education (e-learning design and delivery); and COVID-19 research.

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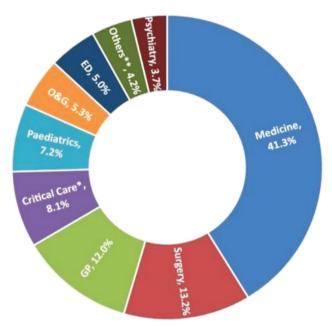


Fig 1. Clinical specialty of respondents. *Includes anaesthetics; **includes radiology, dentistry, genetics, pathology, and public health. ED = emergency department; GP = emergency; GP = emerge

Views on the usefulness of a COVID certificate were varied (n=729) – 72% positive, 17% negative and 11% mixed/neutral. Most welcomed the proposal as a source of 'reward', 'confidence booster' and 'recognition' for their 'hard work', but also as a record of learning during the temporary 'pause in training'. However, it was perceived that a 'generic' document would lack competitive advantage and be superfluous to existing e-portfolios. Others cited concerns about additional bureaucratic workload and lack of formal endorsement for use during Annual Review of Competence Progression (ARCP). Some viewed the process as potentially discriminatory to those who were not formally redeployed, including 'shielding' colleagues, who may be perceived as less deserving. In view of these responses, it was apparent that self-certification should be voluntary and adaptable to suit diverse experiences, with minimal administrative burden.

		Health Education England
	COVID SELF-CERTI	FICATION
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	sional registration number:	
	gion/Employer: lepartment of redeployment:	
	of hospital where redeployed	
	on of redeployment:	
scri	be any changes to your role during the COVID-19 pande	
	This document can be completed by any health professional (medical or no	n-medical)
scri	be any clinical experience and knowledge gained releva	nt to your normal speciality and/or training
ogra	mme during COVID-19.	
	Consider: interpretation of COVID blood markers and swab results, change: control/PPE, surgical management of COVID patients. This could be cross-r	
scri	be any experience and knowledge gained in general me	
e. pa	Illiative care, virtual clinics, rehabilitation, infection cont	rol, medicine prescribing)
	Consider general medical on calls for trainees or staff outside medicine	
scri	be any experience and knowledge gained in a level 2 or	3 setting that is outside your usual scope of
	te e.g. Critical Care or Medical High Dependency Unit	3 setting that is outside your usual scope of
	Consider experiences in NIV, CPAP	
	To avoid duplication, consider completing the COVID 'skills passport' if more	e applicable to you
scril	be any transferable skills and experience related to GMO	C's Generic Professional Capabilities
	www.gmc-uk.org/education/standards-guidance-and-curricula/standards-and	d-outcomes/generic-professional-capabilities-framework
	Domain 1: Professional values and behaviours Domain 2: Professional skills i.e. practical/clinical skills, communication, de	raling with unrectainty
	Domain 3: Professional knowledge	
	Domain 4: Capabilities in health promotion and illness prevention	
	Domain 5; Capabilities in leadership and team working	
	Domain 6: Capabilities in patient safety and quality improvement Domain 7: Capabilities in safeguarding vulnerable groups	
	Domain 8: Capabilities in education and training	
	Domain 9: Capabilities in research and scholarship	
flect	tion could be documented here or indicate where in e-P	ortfolio reflection can be found.
	This section could also be used to document any skills/experiences that has	
co i	ndicate X, if you have completed a reflection on your ex	perience: Yes No
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Date		Date

Fig 2. The COVID self-certification template.

COVID self-certification 21st July 2020 (Final V1)

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Conclusion

We have created a COVID self-certification template (Fig 2) in collaboration with postgraduate trainee representatives, the Faculty of Intensive Care Medicine and Health Education England. 2

The template is suitable for use by any medical or non-medical healthcare professional. It provides an account of additional capabilities acquired during the pandemic, which may be used as evidence towards attaining curriculum competencies or professional revalidation. It may also facilitate workforce planning

and future redeployment to areas of clinical need to ensure provision of safe, prompt and effective patient care. A follow-up survey³ is currently underway to capture user feedback on the self-certification process.

Conflicts of interest

None declared.

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