

2019

Self-Assessment and Portfolio Guidance for Candidates

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Step-by-step guide to Self-Assessment and the Portfolio Station

The 2019 Core Surgical Training CT1/ST1 National Selection portfolio station scoring process is described in detail below. Please ensure that you have read the following document in full prior to submitting your application.

1. The 2019 Portfolio Station Scoring Guide and information regarding the Portfolio Station and Self-Assessment (can be found at the end of this document) will be published when the advert goes live. This document will provide details of the domains, marking range and points available. This information will also be made available on the specialty webpage on the London and Kent Surrey and Sussex Recruitment [website](#).
2. At time of application, all candidates will be required to complete a 'self-assessment' whereby they will give themselves a provisional Portfolio Score. This is mandatory and candidates will be unable to submit their application without completing this. Please ensure that you answer each question correctly to the best of your knowledge. You must ensure that all questions answered within the 'self-assessment' are accurate at the time of submission. When determining which response to select you should not select an answer based on qualifications not yet given, courses not yet taken etc. Selection of options is solely the candidate's responsibility. In the event that you have realised that you have over-scored yourself in your 'self-assessment' you should contact the London and Kent, Surrey and Sussex Recruitment Office as soon as possible by submitting a query with full details to our applicant support portal: <https://lasepgmdesupport.hee.nhs.uk/support/home>
3. The self-assessment score cannot be changed at any stage between application and interview. Once you have submitted your application, you will no longer be able to amend the 'self-assessment' section of your application.
4. The 'self-assessment' score will be used to shortlist applications if more than 1500 eligible applications are received.
5. Candidates will be required to provide evidence at interview for each declaration of achievement made in the self-assessment in their application. The evidence presented in the Portfolio Folder should follow the same order as the questions. Each applicant must complete the 2019 Core Surgical Training Portfolio Checklist and place this at the front of their portfolio prior to attending their interview. This checklist **must** be presented at the front of your Portfolio and can be found on the advert and the specialty webpage on the London and Kent Surrey and Sussex Recruitment [website](#).
6. On the day of the interview, your Portfolio will be reviewed for 10 minutes prior to your Portfolio Station Interview. During this time, the evidence presented will be verified and assessed by the panel. Your Portfolio Interview will last for 10 minutes where the panel will have time to clarify any discrepancies between your score and that of the assessors.

Please note:

- ***Please note the domains in PURPLE will not be included in the self-assessment section of the application form; however, these domains will be assessed at interview during the Portfolio Station.***
- If evidence presented in the candidate's Portfolio cannot be verified by the assessors during the allocated time a score of zero will be awarded for that domain of the Portfolio.
- If evidence for a particular domain is not present in the Portfolio during the interview station a score of zero will be awarded for the domain. Under no circumstances can marks be awarded retrospectively after the interview station has finished.
- Any other instance of candidates trying to gain an unfair advantage by over-claiming scores for and/or exaggerating their achievements will be taken extremely seriously. This could lead to an application either being marked down, deemed not appointable, or, in more serious cases, could be reported as a probity matter to the GMC. In the event that you realise after submitting your form that you have overclaimed on your form you must send details to LaKSS as soon as possible via: <https://lasepgmdesupport.hee.nhs.uk/>
- **Please bear in mind the GMC's Good Medical Practice guidelines on probity (point 64), as below: "You must always be honest about your experience, qualifications and position, particularly when applying for posts." ([GMC Good Practice](#))**
- Please note that it is the candidate's sole discretion as to which response they select in the self-assessment. Under most circumstances, the London and Kent, Surrey and Sussex Recruitment Office will be unable to advise you which option to choose.

Patient Identifiable Data (PID):

- No documentation at interview should identify patients. This includes e.g. thank-you cards/letters from patients' families. **Hospital numbers are also an example of patient identifiable data.** If you wish to include these in your Portfolio please ensure that they have been anonymised.
- Instances where patient identifiable data is found in an applicant's portfolio may be reported to the GMC and further action may be taken.
- For more information on PID, please refer to the GMC's confidentiality guidance pages ([GMC Confidentiality Disclosing and GMC Confidentiality Info](#)).

2019 Core Surgical Training Portfolio Station Scoring Guide

Domains in YELLOW will form the self-assessment. Domains in PURPLE will not be included in the self-assessment but will be assessed at interview.

Key Skill	Scoring Guide	Scoring range
Postgraduate degrees and qualifications and additional degrees	<ul style="list-style-type: none"> - Primary Medical Qualification only <p>And/Or</p> <ul style="list-style-type: none"> - 2.1, 2.2 or 3rd class BMedSci awarded at University of Nottingham 	0
	<ul style="list-style-type: none"> - Degree obtained during medical course (eg intercalation, BSC, BA, etc) – 2.1 or equivalent. <p>And/Or</p> <ul style="list-style-type: none"> - Undergraduate degree obtained prior to starting medicine – 2.1 or equivalent <p>And/Or</p> <ul style="list-style-type: none"> - MPhil Master of Philosophy <p>And/Or</p> <ul style="list-style-type: none"> - Single-year postgraduate course (eg MSc,MA,MRes, etc) <p>And/Or</p> <ul style="list-style-type: none"> - MD Doctor of Medicine <p>And/Or</p> <ul style="list-style-type: none"> - Nottingham BMedSci – 1st Class Honours 	2
	<ul style="list-style-type: none"> - Undergraduate degree obtained prior to starting medicine - 1st class honours or equivalent including BDS <p>And/Or</p> <ul style="list-style-type: none"> - Degree obtained during medical course (eg intervalation, BSc, BA, etc) – 1st class honours or equivalent (excluding Nottingham BMed Sci) <p>And/Or</p> <ul style="list-style-type: none"> - PhD or DPhil Doctor of Philosophy <p>And/Or</p> <ul style="list-style-type: none"> - MD Doctor of Medicine – two-year original researched based 	4
<p>Examples of Acceptable Evidence Evidence not listed may be acceptable if it can be validated</p>		
Original degree certificate		
Key Skill	Scoring Guide	Scoring Range
CPD courses	None	0

	One course relevant to surgery	1
	Two courses relevant to surgery	2
	Three courses relevant to surgery	3
	Four courses relevant to surgery	4
	<p>Maximum 1 mark per course relevant to surgery. For example:</p> <ul style="list-style-type: none"> - BSS - START Surgery - ATLS, Surgical Skills for Surgeons - RCS Summer School in Anatomy - Practical Skills for Medical Students - So you want to be an Orthopaedic Surgeon - Clinical Skills for Examining Orthopaedic Patients or equivalent surgically orientated courses - Temporal bone course - FESS (Sinus surgery) course - Head and Neck anatomy / surgical dissection course - Urology Courses: National Catheter Education Programme (NCEP) 	
<p>Examples of Acceptable Evidence Evidence not listed may be acceptable if it can be validated</p>		
<p>Completed and passed courses only: Certificate of completion <i>or</i> Letter confirming results</p>		
Key Skill	Scoring Guide	Scoring Range
Additional Achievements	None/other: please specify	0
	Scholarship/bursary/equivalent awarded during medical undergraduate training.	2
	One prize/distinction/merit related to parts of the medical undergraduate training awarded to no more than the top 20%	3

	More than one prize/distinction/merit related to parts of the medical undergraduate training awarded to no more than the top 20% And/Or High-achievement award for primary medical qualification (e.g. honours or distinction) awarded to no more than the top 10%	4
	Awarded national prize related to medicine (open to all trainees)	5

Examples of Acceptable Evidence

Evidence not listed may be acceptable if it can be validated

- Original letter from medical school / Departments/ Foundation School
- Original certificate

Key Skill	Scoring Guide	Scoring Range
Quality Improvement (clinical audit)	None/other please specify	0
	I have participated only in certain stages of a quality improvement project	3
	I have actively participated in using QI methodology through a QI project; but I have not presented the complete results at a meeting within a local Trust	5
	I have actively participated in using QI methodology through a QI project; and I have presented the results at a meeting within local Trust	7
	I have designed, led and implemented change using QI methodology through a QI project; and have presented this at a local meeting	9
	I have designed, led and implemented change using QI methodology through a QI project; and I have presented the results at a Regional or National meeting	11

Examples of Acceptable Evidence

Evidence not listed may be acceptable if it can be validated

- Copy of audit project presentation hand-outs for project
- Letter from consultant or supervisor stating level of involvement
- Evidence of exceptional commitment

Key Skill	Scoring Guide	Scoring Range
Teaching experience	No evidence of teaching	0
	I have taught medical students or other healthcare professionals occasionally. I have evidence of formal feedback	2
	I have provided regular teaching for healthcare professionals or medical students over a period of approximately three months or longer. I have evidence of formal feedback	4
	I have organised a local teaching programme for healthcare professionals or medical students consisting of more than one session and contributed regularly to teaching over a period of approximately three months or longer. I have evidence of formal feedback	6
	I have worked with local tutors to design and organise a teaching programme (a series of sessions) to enhance locally organised teaching for healthcare professionals or medical students. I have contributed regularly to teaching over a period of approximately three months or longer. I have evidence of formal feedback	8
Examples of Acceptable Evidence		
Evidence not listed may be acceptable if it can be validated		
<ul style="list-style-type: none"> - Original certificate for teaching qualification - Letter confirming attainment of teaching qualification - Letter confirming involvement in a teaching programme 		
Key Skill	Scoring Guide	Scoring Range
Training in teaching	I have had no training in teaching methods	0
	I have had brief training in teaching methods lasting no more than two days or online modules. I can provide evidence to demonstrate this	2
	I have had substantial training in teaching methods lasting more than two days. I can provide evidence to demonstrate this And/Or I am currently undertaking a course for a higher qualification in Teaching and can provide evidence to demonstrate this	3
	I have higher qualification in teaching e.g. PG Cert, PG Dip, MA/MSc	4
Examples of Acceptable Evidence		
Evidence not listed may be acceptable if it can be validated		
<ul style="list-style-type: none"> - Certificate of attendance - Evidence of registration for higher qualification in Teaching 		
Key Skill	Scoring Guide	Scoring Range

Presentations	None/ other please specify	0
	I have given an oral presentation, or shown one or more posters at a local medical meeting(s) And/Or I have shown one or more posters at a regional medical meeting(s)	2
	I have shown one poster at a national or international medical meeting And/Or I have given an oral presentation at a regional medical meeting	4
	I have given an oral presentation at a national or international medical meeting And/Or I have shown more than one poster at national or international medical meetings	6
Examples of Acceptable Evidence Evidence not listed may be acceptable if it can be validated		
<ul style="list-style-type: none"> - Copy of presentation (hard copy) and copy of event programme - Copy of publication including PubMed number or link to publication If accepted proof of acceptance 		
-		
Key Skill	Scoring Guide	Scoring Range
Publications	None	0
	I have published one or more abstracts or non-peer-reviewed articles And/Or I am first author, joint-first author, or co-author of one PubMed-cited other publication (or in press)	2
	I am co-author, of one Pub-Med-cited original research publication (or in press) And/Or I am first author, joint-first author, or co-author of more than one PubMed-cited other publication (or in press)	4
	I am co-author of two or more PubMed-cited original research publication (or in press) And/Or I am first author, or joint-first author, of one PubMed-cited original research publication (or in press)	6
	I am first author, or joint-first author, of two or more PubMed-cited original research publications (or in press)	8
Examples of Acceptable Evidence Evidence not listed may be acceptable if it can be validated		
Publication in Portfolio and Reference (Pub-Med)		
Key Skill	Scoring Guide	Scoring Range

Leadership and management	None/other: please specify	0
	I hold/have held a local leadership or managerial role related to my role as a doctor or medical student for 6 or more months and can demonstrate a positive impact	4
	I hold/have held a regional leadership or managerial role related to my role as a doctor or medical student for 6 or more months and can demonstrate a positive impact	6
	I hold/have held a national leadership or managerial role related to my role as a doctor or medical student for 6 or more months and can demonstrate a positive impact	8

Examples of Acceptable Evidence

Evidence not listed may be acceptable if it can be validated

- Letter confirming attainment of leadership role.
- Letter confirming involvement in a leadership programme

Key Skill	Scoring Guide	Scoring Range
Commitment to surgery (all surgical specialties) ONLY ASSESSED AT INTERVIEW	<p>Gives clear examples of commitment to surgery in portfolio evidenced by examples shown to the right (not scored in another section of the Portfolio)</p> <ul style="list-style-type: none"> - Surgical audit or research project - Membership of Surgical Society - Surgical elective - MRCS Part A - Surgical Experience evidenced by an operative logbook - Attendance at surgical conferences - Evidence of a Surgical Taster with Portfolio, with reflection 	0 – 8

Examples of Acceptable Evidence

Evidence not listed may be acceptable if it can be validated

- Any specific specialty level skills e.g. practical skills
- Any specific surgical or related experience or training (e.g. posts, specialist clinics, taster sessions, work abroad, etc.)
- Surgical research commenced or grants applied for that have not yet resulted in presentations or publications
- Presentations, papers etc. in preparation or submitted, awaiting review
- If MRCS exam has been sat or passed

Key Skill	Scoring Guide	Scoring Range
Clinical / procedural experience in both surgical	No evidence of clinical / procedural experience in either surgical or non-surgical posts	0
	Has satisfactory evidence of learning practical skills during foundation training or equivalent or exposure to surgery or surgical outside of foundation	1

and non-surgical posts	Demonstrates experience in practical procedures gained during training - ahead of expected competences - either surgical or non-surgical or if non-surgical posts, practical procedures gained from that speciality	2
	Demonstrates exceptional motivation developing practical procedures well ahead of expected competences - either surgical or non-surgical	3
Examples of Acceptable Evidence		
Evidence not listed may be acceptable if it can be validated		
<ul style="list-style-type: none"> - Letter from educational supervisor confirming experience - Letter from Medical Staffing confirming length of appointment - Written evidence of completion of undergraduate surgical module - Copy of essay, publication, project work completed as an undergraduate - Evidence of reflection 		
Key Skill	Scoring Guide	Scoring Range
Organisation of Portfolio ONLY ASSESSED AT INTERVIEW	Index as per marking criteria Well-presented Portfolio Concise and appropriate content	0-3
Examples of Acceptable Evidence		
Evidence not listed may be acceptable if it can be validated		
Organisation of Portfolio Folder		

Preparing your Portfolio

The Portfolio station is designed to assess past achievements, commitment to surgery and career progression to date. It is also an opportunity to display your achievements in all the domains listed in the 2019 Core Surgical Training Portfolio Station Scoring Guide.

Applicants will be asked to refer to items in their portfolio at the interview, therefore the evidence must be easily accessible: for example, audits or service improvements and research examples.

For guidance regarding the type of evidence expected for each domain, please refer to the 2019 Core Surgical Training Portfolio Station Scoring Guide. Please ensure you have read the following points prior to preparing your presentation:

- Although many trainees are now using e-Portfolio, we would still require a hard copy summary. You are not expected, however, to print the entire portfolio. Only relevant extracts e.g. If using RCS ISCAP print only with the OPERATIVE consolidation sheet and not your entire operative logbook. Use a Proforma to provide an executive summary of publications, presentations and teaching undertaken.
- Use one lever arch file for all your documents
- Include your CV
- Place the portfolio checklist at the front of your folder so panellists can easily locate evidence relating to the Person Specification
- Place an index in the front of the folder areas of your Portfolio that you would like to highlight. This should be clearly numbered to match the Portfolio checklist. Use marker tabs so that sections can be found quickly
- Use bullet points to list each item of evidence under each section of the portfolio checklist. The checklist should be completed electronically and printed
- Include a printed copy of your application form (excluding the sections relating to equal opportunities and references)
- If you use plastic wallets make sure documents can be easily removed and examined by panel members
- **Don't include any patient identifiable data or items/information that are not yours (e.g. someone else's work or hospital guidelines)**

Glossary of terms

Presentations

- **International Level Presentations** - For a presentation to qualify as 'international' it needs to have been delivered in a country other than your country of residence/education at time of delivery or a recognised international meeting that rotates to different countries, e.g. Ottawa, AMEE etc.
- **National Level Presentations** - Presentations delivered on a national level refer to when an applicant has delivered a presentation in the country where their undergraduate education took place, or at their time of residence, e.g. if an applicant delivered a presentation in Sweden whilst undertaking their undergraduate education in Sweden, this cannot be classified as 'International' just because it is outside of the UK: it would be national. This is the case unless it was a recognised international meeting as defined above.

United Kingdom The UK comprises the four nations, therefore presentations within these countries by someone who is residing in the UK is considered national, regardless of the country of residence, e.g. if the presentation is delivered in Wales by an applicant based in Northern Ireland, this is classified as 'national'.

- **Regional** - refers to presentations confined to, for example, the county, HEE local office/Deanery, health authority, or a recognised cluster of hospitals, extending beyond a city.
- **Local Level Presentations** - Local level presentations are those delivered as part of an institutional process, e.g. at a local trust/ hospital where you have been working, or at an educational institution setting.

Publications

- **In press** - this means that your piece has been fully accepted for publication; no further alterations are required; and it is just waiting to be published. The PubMed ID or hyperlink must be included in the relevant field.
- **PubMed** - virtually all published articles relevant to medicine will have a unique PubMed ID number (PMID) assigned to it. If a published article does not have a PMID, it is unlikely to be relevant here. The PubMed ID or hyperlink must be included in the relevant field.
- **Peer-reviewed** - this means that your piece has been sent to one or more independent reviewers prior to acceptance for publication. The PubMed ID or hyperlink must be included in the relevant field.
- **Submitted article** - this cannot gain any marks through the questionnaire section because it is not known if it will be published. You cannot select an option from the drop down menu that states you have an article published if it has only been submitted. However, you may wish to mention it in the white space section relating to publications.
- **First author** - this means first on the list of authors. The PubMed ID or hyperlink must be included in the relevant field.

- **Joint first author** - this is a specific definition and will be specified in the publication. The PubMed ID or hyperlink must be included in the relevant field.
- **Co-author** - this means that you are on the list of authors, but are not first or joint-first author. The PubMed ID or hyperlink must be included in the relevant field.

Teaching Experience, Training in Teaching

- **Regional** - this means the teaching participation extends beyond a local hospital or university setting; for example, the county, or a recognised cluster of hospitals, extending beyond a city.
- **Local** - this means the programme is confined to a local hospital, trust or university setting.
- **Designing and organising** - this means you have identified a gap in the teaching provided and have worked with local tutors to design and organise a teaching programme and arrange teachers. You have delivered at least one of the sessions yourself.
- **Extensive training in teaching** - this means you have undergone formal training, lasting between five and 20 days (whole time equivalent) and also includes a formal postgraduate diploma/certificate lasting over a month. Extensive training is defined as more than the usual short (one or two day) course which is mandatory for most trainee doctors, and more than the usual online modules completed in a few hours.
- **Feedback** - this means you have either evidence of senior observation/feedback (eg teaching observation tool, developing the clinical teacher form, etc.) or that there has been independent collection and analysis of participants' feedback forms, supported by a letter or certificate from the course organiser or deputy.
- **Formal Teaching methods** – this needs to be outside of the standard programmes offered by training bodies (foundation schools, HEE local office, deaneries, etc.) This is because most trainees applying to CT1 posts will likely have undergone some training in teaching 'automatically' as part of their training to date. Formal training refers to experience of teaching training beyond this; this does not have to be an external course necessarily, but a substantial course that would not have been provided to a trainee as a normal part of their training to date. In general formal training would last between a minimum of 3 and 20 days. Additionally, this may result in a higher qualification in teaching.
- **Led a teaching programme** – this means that you were responsible for the overall delivery of the teaching programme and also delivered part or the entire programme yourself.
- **Contributed to a teaching programme** – this means that you have had a key role in organising the teaching programme and/or may have been involved in the delivery of the programme but did not lead.