

# A Guide To Being A Greenwich GP Registrar

[www.greenwichgptraining.org](http://www.greenwichgptraining.org)

by

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## Introduction

The GP registrar year is a pivotal point in your training. It feels great to start doing what you entered the VTS for & what you will be doing for the rest of your career. However the breadth of medical knowledge you require, the sudden increase in admin & form filling, the numerous exams & the expenses can make it all a bit daunting. Most registrars feel lost at the beginning of the year & they say it can take a few months before you get to grips with the structure of the year. In order to make this transition slightly easier I have written this booklet that hopefully covers all the major aspects of the GP registrar year.

## Useful Contacts

*VTS website:* [www.greenwichgptraining.org](http://www.greenwichgptraining.org)

### Course Organisers:

Dr David Wheeler  
Email [davidwheeler@homechoice.co.uk](mailto:davidwheeler@homechoice.co.uk)

*Based at:-*  
Gallions Reach Health Centre  
Bentham Road  
Thamesmead  
SE28 8BE  
Tele: 020 8333 5000/5001

Dr Lia Cristofoli  
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25 John Wilson Street  
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VTS administrator:  
Miss Nikola Hewitt  
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*Based at:-*  
Education Centre  
Queen Elizabeth Hospital Woolwich  
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London  
SE18 4QH  
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### London GPVTS Committee (LGC)

Representatives from each Specialty Training year group, who meet regularly to address trainee needs at the London Deanery:

[www.londongptraining.com](http://www.londongptraining.com)

# **The GP Registrar Year - A Unique Opportunity**

The London Deanery states, “The GP registrar year is a unique opportunity for planning and shared responsibility for education and training within a supportive environment that fosters personal and professional development. It is an opportunity envied by many other specialities and general practice vocational training has led the way in teaching and assessment methods in medical education. The Deanery has an established track record of high quality education and innovation in this area.”

## **Before Your Registrar Year**

### **GP Trainer**

A few people say it does not matter who your GP trainer is or what practice you work at. However the majority of registrars would disagree with this. Unlike your SHO posts where you might occasionally sit down with your educational supervisor to discuss your progress in your registrar year you will have a half-day a week for teaching & supervision. They will be your guide through your registrar year giving you advice & support regarding various issues.

A month or two into your last SHO post the London deanery will contact you by post asking to confirm your GP trainer & practice for your registrar year. It is likely that your Educational Supervisor (from ST1/2 yrs) will become your GP Trainer. The number of GP trainers available to train registrars can vary, and if you have any concerns, discuss them with one of the Programme Directors.

The general feedback is that all the GP trainers in Greenwich are experienced, knowledgeable & supportive. I would advise you to talk to current registrars about the various practices so you can gain an idea about the practice you may be working at.

It is worth contacting your future trainer & visiting the practice so you can have a look around & also meet other members of the team.

### **MDU/MPS**

The SHO subscription (£60-80 a year) you were paying will not be enough for your work in a GP practice as a GP registrar. Thus you will have to pay extra whilst working as a GP registrar (do not worry as you can get this money reimbursed.) The reason for this is that doctors working for NHS hospitals (i.e. during your SHO posts) have indemnity via the NHS trust against claims of clinical negligence from patients. Doctors who do not work in NHS hospitals (i.e. GP registrars & GPs) have to seek their own indemnity against claims from patients.

With a few months before the start of your registrar year, you should contact the MDU/MPS. They will then let you know how much you have to pay. In general a registrar will have to pay £1400-£1500 to the MDU/MPS to cover you for the registrar year.

Due to the large price difference between the SHO & GP registrar subscriptions, the Primary Care Trust (PCT) will reimburse you, so that you have effectively paid the same SHO subscription as your colleagues working in hospital (roughly £120 for the year.) You can either make this a one off payment at the beginning of your registrar year, or as a monthly payment. The MDU/MPS will then send you renewal documentation/receipt for this payment. When you start as a registrar ask your practice manager for the reimbursement forms. Complete & send off all the paper work & hopefully you will get the money back within 8 weeks either added to your pay packet or as a separate cheque. Obviously not everybody has a spare £1400 in their account so the MDU/MPS do allow you to pay this in monthly instalments. However make sure this is OK with your practice/PCT regarding getting your money reimbursed.

### **GP Primary Medical Performer's List**

Legally to see patients as a GP registrar or a GP in practice you must be on the local PCT's primary medical performer's list. Essentially the PCT check out your qualifications & make sure you are appropriately qualified & competent to see patients. This involves filling in an application form & providing your medical school certificate, GMC certificate, CRB etc. etc. Fully qualified GPs were also on the local PCT's performers list but this has now been superseded by the GMC GP register.

Legally you can only see patients once you are on the performer's list of the area you work in, so you will have to just sit in on clinics & observe until then. To avoid this it's best to **apply a few months before you start your registrar post**. I am sure your trainer will tell you to do this on your initial visit to the practice. The application can take up to 8 weeks to process. The person to contact is:

Miss Margaret Kennelly  
Email:  
[margaret.kennelly@greenwichpct.nhs.uk](mailto:margaret.kennelly@greenwichpct.nhs.uk)  
Tel: 0203 260 5168

Based at:-  
GP Contracts Officer  
Highpoint House  
Memorial Hospital  
Shooters Hill  
London SE18-3RZ

You will also have to contact Miss Kennelly at the end of your registrar year, giving her the appropriate paperwork confirming you have finished all your training so that you appear as a fully qualified GP on the GMC GP register (I will go into this further.)

There are other benefits associated with inclusion on the performers list, including dissemination of information relating to local and national health issues (e.g. public health cascades), educational opportunities, and provision of BNFs etc.

### **Payroll Admin**

The pay in practice is not like the banding system in hospital but is still based on experience i.e. the number of SHO years you have done. To ensure you get paid correctly

please, please do the following things *otherwise* you will be spending the first few months of your registrar year on the phone trying to sort it all out:

- 1) With a few weeks left of your last SHO post go to medical personal & fill in a staff leavers form (in this you document where you will be going to next) & ask for a staff transfer form to be filled in (this should contain a list of all your previous jobs & your pay details to date), this bit is normally done by payroll
- 2) After a week or so phone up payroll & make sure the staff transfer form has been done & check they have filled in your list of previous jobs properly. Ensure this will come in your last pay slip along with your P45.
- 3) On your first day at your new practice hand in your staff transfer form, last pay slip & P45 to the practice manager. Then there should be no problems.

I know this sounds all a bit much & you would have thought that if you have been at the QEH for two years all your details would be correct. But trust me I have heard many stories of incompetence such as not all your SHO posts being documented on your staff transfer form so the practice has to make you a year one or two SHO equivalent in terms of pay even though you are a year three SHO until they get a corrected staff transfer form & payroll will always turn back to you & say “its your responsibility to make sure everything is done”

### **The London Deanery**

Roughly two months before the start of your registrar post you will receive a letter from the Deanery confirming your trainer. They will also ask you to fill in an occupational health questionnaire.

### **GP Registrar Induction Day**

The London GP VTS Committee (LGC) organise an induction day at the beginning of each registrar year. The London deanery funds these days so they are free. They outline what is expected of you during the registrar year. There is also a book sale with discounted prices & a free lunch. Most registrars find it useful as an introduction to the year. It is normally at the end of the first month of your registrar year.

Check out the LGC website closer to the time for exact dates:

[www.londongptraining.com](http://www.londongptraining.com)

Let your trainer know that you want to go on this as soon as you start, so you do not have a clinic booked that day.

# When You Start

## Induction

Most registrars on starting in a new practice will have one to two weeks' induction. You should be given a timetable for the next week or so where you will be sitting in on doctors, nurse practitioners & practice nurses clinics where you will be essentially getting a flavour of GP consultations & what kind of patients you will be seeing. Hopefully timetabled will be specialist clinics e.g. immunisation or asthma clinics & if present on site a session with the pharmacist. Your first day will most probably be sorting out paper work, meeting everyone & orientating your self around the practice. You should also get a few hours training on the computer system used in you practice (most use EMIS or Vision systems) & you will also be given your log-in details. Do not worry if you cannot figure it out straight away, it can take sometime.

If you have not already received it ask about your GP registrar-trainer contract. It is usually self-explanatory but essentially it is three pages of the trainer's duty to you & your duty to the practice. A sample contract can be found on the BMA website. If you have any questions regarding the contract speak to your trainer or the practice manager. It should then be signed & witnessed by yourself & the trainer. Remember the contract is with your practice & not the Deanery.

The second week should include sitting in with the "duty doctor" for one session. The duty doctor is essentially the GP on call for the practice, he/she will see emergencies, take telephone enquires, do urgent home visits. You should also start to see patients on your own, supervised by your trainer. The guidelines for Greenwich trainers state that each half-day is considered to be one session & you may start with seeing eight to twelve patients in one session with 15 minutes per patient with one 15 minute break. Most trainers will start with this & after about 20 weeks you will gradually go down to 10 minutes per consultation. This is a change from previous years where people started with 20 minutes per consultation & current registrars have raised concerns regarding this. Hopefully there will be some flexibility to met peoples individual learning needs as people do progress at different rates. However, you should never be pressurised into reducing consulting times if you do not feel ready for it. Such decisions should be made in conjunction with your trainer. Bear in mind that the step down to 10 minutes would be easier once you have completed your nMRCGP CSA module and AKT.

Obviously seeing patients by your-self can be daunting. There will always be someone to ask if you are stuck. Most practices pair you up with a supervisor for the session & they will have slots inserted into their clinic list, which allows them to catch up with their work whenever you seek their advice. This means you do not have to feel guilty about slowing them down. In other practices you are left to your own devices (ideally this should not happen until you are at least six months into the post!) & you ask who ever is available. Whichever set-up is in your practice never be afraid to ask for help, no one will mind & it is the only way you will learn.

## **The structure of your week**

Your week consists of 10 half-days or sessions. Seven of these will be clinical sessions (i.e. seeing patients.) There is one tutorial/debrief session where you can discuss any clinical problems you have as well as have teaching, & completing parts of the e-portfolio. One session is for the VTS half-day release (which is compulsory and forms part of your study leave). The final session is for private study, which needs to be clearly defined & agreed with your trainer. It can just be for private study or you can organise to sit in on specialist clinics in the hospital for educational purposes. How you organise your week in terms of your sessions will be up to the practice manager & trainer. You should be given a timetable at least a week in advance so you know when your half day is etc.

Early on you should start videoing your consultations as it can be a real eye opener in terms of the way you consult, and you will need them for your COT Assessments (Consultation Observation Tool). By five weeks you should start to do one duty doctor session per week, supervised by your trainer. By six months the consultation time should be down to 10 minutes. You may also want to start doing specialist clinics e.g. antenatal, diabetic clinics as you progress through the St3 year.

## **On-calls/Out of Hours (OOH)**

In terms of on-calls you will have to do one OOH session a month, which normally lasts about five hours. This is compulsory and is part of your e-portfolio.

These sessions happen at GRABADOC, an independent GP co-operative that provides the OOH service for Greenwich & Sidcup. It is based on Shooters Hill Road very close to the Queen Elizabeth Hospital. Most Greenwich trainers do shifts there. The deanery states that OOH can occur in the evenings, weekends or nights, but in Greenwich they are normally weekdays between 18:30 & 00:00. "Training nights" are usually on three nights per month, and a rolling rota operates on our VTS. On these occasions the trainers are happy to have up to four registrars with them. Additional nights may be arranged on an individual basis.

You should contact GRABADOC prior to your attendance so that they can set you up with a login code, and password for the Ad Astra system.

### Contact details for GRABADOC

394 Shooters Hill Road  
Woolwich  
London SE18 4LP  
Tel: 020 8319 3030

Email: [sue.howe@nhs.net](mailto:sue.howe@nhs.net)

Before you do any OOH sessions you will find it useful to print the OOH logbook from the London deanery website (<http://www.londondeanery.ac.uk/general-practice/files/specialty-training/appendix3oohworksheets.pdf>), in order to log the details into your e-portfolio.

You should experience a wide range of models of out of hours care which might include telephone triage & home visiting. The purpose of the out of hours work is educational and experience should be sufficient to equip registrars with the skills to provide out of hours care independently at the end of training. The GP registrar's salary includes an element to cover out of hours care. It is illegal for the GP registrars to undertake locum out of hours or deputising sessions because they have not yet achieved accreditation.

## The Registration Process

### The nMRCGP examination

**AKT:** (<http://www.rcgp-curriculum.org.uk/nmrcgp/akt.aspx>)

- Computer-based, at Pearson VUE test centres on three occasions each year
- 3 hours
- 200 multiple-choice questions
  - 80% clinical medicine
  - 10% critical appraisal
  - 10% evidence based medicine
- Questions include:
  - Single Best Answer, Extended matching Questions,
  - Completion of Algorithm, Picture Format, Data Interpretation, Seminal Trials

#### *Application process:*

1. Register for the nMRCGP through the RCGP website, then
2. Apply online (RCGP website) to sit the test on the next available date. The applicable fee must be paid, normally online using a credit card.
3. Book a test by phoning Pearson VUE and choosing a test centre. Details of centres and their locations are available on the Pearson VUE website.

**CSA:** (<https://integra.rcgp.org.uk/membersarea/multievents/layout4.asp>)

#### Format

##### *Timing*

- 3 hours
- 13 consultations (1 is a pilot) with 2 minute breaks in between
- One 15 minute break half way through

##### *Consultations*

- Consultations may be surgery, telephone or home visit
- Candidates sit in their own consultation room unless home visit
- Patients and examiners come to you
- All patients are trained role players
- Some consultations involve parents consulting about their babies/ children

### *Paperwork*

- All 13 case histories are in a folder on your desk at the beginning
- Notes made on patient histories will not be marked

### *Physical examinations*

- Some physical examinations may be required
- More invasive/ time consuming examination results will be offered on request

### *Prescriptions*

- Blank prescriptions are supplied – they will be marked if written.
- You may also tell the examiner/ patient what you would prescribe. This will also count towards your mark

### *Equipment and ID required*

You need to remember your own equipment:

- |                                    |                  |
|------------------------------------|------------------|
| - Stethoscope                      | - Auroscope      |
| - Sphygmomanometer                 | - Patella hammer |
| - Peak flow meter and mouth pieces | - Tape measure   |
| - Ophthalmoscope                   | - BNF            |

## **Workplace Based Assessment**

Workplace based assessment (WPBA) is defined as the evaluation of a doctor's progress over time in their performance in those areas of professional practice best tested in the workplace. Evidence is collected over all three years of training. The evidence is recorded in a web-based portfolio (the ePortfolio) and used to inform six monthly reviews and, at the end of training, to make a holistic, qualitative judgment about the readiness of the Registrar for independent practice.

*The WPBA tools are:*

- \* Case-based Discussion
- \* Consultation Observation Tool
- \* Multi-Source Feedback
- \* Patient Satisfaction Questionnaire
- \* Direct Observation of Procedural Skills
- \* Clinical Evaluation Exercise (Mini-CEX)
- \* Clinical Supervisors Report.

It is learner led: the Registrar decides which evidence to put forward for review and validation by the trainer.

## **CPR**

In addition you need to provide evidence of proficiency in cardio-pulmonary resuscitation (CPR) including the use of an automated external defibrillator. CPR training may be organised locally by your individual your practice or as a group session at QEH.

## **Postgraduate Medical Education & Training Board (PMETB)**

As part of the nMRCGP the deanery will complete the final ARCP (Annual Review of Competence Progression) form to confirm the satisfactory completion of your training programme. When the RCGP Certification Unit receives your final ARCP form it will check whether your application is complete, whether the nMRCGP has been satisfactorily completed and whether your training complies with Article 10 of the Regulations. It will then recommend to PMETB whether or not you are eligible for a CCT.

PMETB will marry this recommendation up with your application to them and, if appropriate, will then issue a certificate to you. If the PMETB decide that you are not eligible for a certificate they will communicate this to you in writing with reasons and a recommendation of the further training that you will need to undertake. The PMETB CCT is one of the certificates, which legally permits its holder to work in NHS general practice

The Certification Unit will send you a PMETB GP CCT application form in your final 6 months of training, which must be forwarded to PMETB along with the relevant documentation and their fee - current fee (up to 31st March 2009) for a CCT application is £780.

PMETB  
7<sup>th</sup> Floor  
Hercules House  
Hercules Road  
London SE1 7DU  
Tele – 020 7160 6187/6100  
Email: [gpcct@pmetb.org.uk](mailto:gpcct@pmetb.org.uk)

### *NB: VTR2 forms*

If you started your training post prior to August 2007, you will be required to submit completed VTR2 forms to the London Deanery, to gain ‘endorsement by director of postgraduate general practice education.’ Once this is sent back to you, you must then send it through to the RCGP Certifications Unit.

RCGP Certification Unit  
2nd Floor, 31 Southampton Row  
Holborn,  
London WC1B 5HJ  
Tel: 020 3170 8230  
Email: [certification@rcgp.org.uk](mailto:certification@rcgp.org.uk)

# Planning Your Registrar Year

## Month 1

- Make sure you have completed all the paper work that ensures you are on the performers list. Familiarise yourself with the e-portfolio requirements for your ST3 year.
- Sit down with your trainer and plan the year; discuss your educational half day releases
- Consider booking early for your AKT and CSA
- Plan for courses you may wish to take, and plan your study leave

## Month 3

- If not done so, consider booking your AKT and CSA
- Arrange regular reviews of your training needs with your trainer
- Begin/complete the PSQ's, and MSF's on the e-portfolio.

## Month 5

- Consider booking your CSA (if not done so already), and plan to obtain your CPR/AED certification.
- Ensure minimum requirements have been completed for the e-portfolio, prior to meeting your trainer for your 6 month review

## Month 9

- Ensure minimum requirements have been completed for the e-portfolio, prior to Panel Review (normally occurs in June/July of completion year)

## Month 12

- You will have hopefully have received your CCT by now. Contact Margaret Kennelly at the Greenwich PCT, as she will have to see & have a copy of your CCT. She will then update the records on the performers list/GMC GP register confirming you are a fully qualified GP, thus you can start working as a GP associate or partner at the end of your registrar year. Failure to do to this will result in removal of your name from the list making it illegal for you to work as a locum, assistant or retainer.

### ST3 Year –e-portfolio deadlines

30 month review	34 month review	Deanery Sign off
Based on evidence of	Based on evidence of	
6x COT (mini-cex)	6x COT (mini-cex)	☺
6x CBD	6x CBD	☺
1x MSF	1x MSF	☺
	1x PSQ	☺
DOPS	DOPS	

## Pay

You will be paid by the practice, who reclaim your pay from the PCT on a monthly basis. So you will be asked to sign forms on a frequent basis so they can do this. Your pay will include London weighting. We no longer have a car allowance; but you are able to claim back, according to the London Deanery. The deanery suggests contacting the PCT, and your practice manager should provide the contact name for this, and you will be reimbursed per mile.

There are also a lot of expenses, so make sure your finances are all in check prior to starting the registrar year.

- MDU/MPS subscription - £1400 (\*\*Reimbursed)
- MRCGP exam
- Each attempt at Applied Knowledge Test (AKT):
  - Associate in Training: £378
  - Non-AiT: £420
- Each attempt at Clinical Skills Assessment (CSA):
  - Associate in Training: £1323
  - Non-AiT: £1470
- Family planning course (theory) - £200-300
- PMETB application - £780

Study Leave: £465 per 12-month training period or pro rata

## Study Leave

<http://www.londondeanery.ac.uk/general-practice/courses-and-conferences/gp-registrar-educational-allowance>

The total for the year is a maximum of thirty days. It is assumed that VTS half days will use up fifteen of these days (thirty sessions) and that local VTS residential courses will take up a further four days (i.e. Wychcroft), although this may vary from VTS to VTS. This leaves 11 days for other study leave in the year. This could be taken as two whole weeks plus a day or in smaller fragments if one has a shorter course to attend. The VTS residential course is considered to be part of the VTS programme and cannot be traded for other study purposes i.e. you may not sacrifice it in order to add more days to the other study leave. However, implicit in the rules about study leave is the need for a degree of flexibility to meet any special learning needs that a GPR might have. Any such flexibility i.e. study leave taken in excess of the 30 day total has to be discussed with and agreed by the GP trainer. Most trainers will not include days taken off in order to sit exams in your study leave allowance but its best to double check with them.

As a GP registrar coming into the general practice portion of training in an accredited training practice, the Department of Postgraduate General Practice will provide you with an Educational Allowance of £465 during your total 12 months training period. This £465 covers not only course fees but also travel and subsistence expenses incurred whilst attending educational events.

Discuss the courses you wish to attend with your trainer and obtain his/her approval before applying. Most courses that you would want to attend in your registrar year should be eligible for reimbursement. If you are unsure contact the deanery.

Once you have undertaken your course, complete and return form DPGP/1 (<http://www.londondeanery.ac.uk/general-practice/files/courses/str-ed-allowance-claim-form-jan-08.doc>), enclosing the original receipt for payment and a certificate of attendance, retaining a copy for your files. You can obtain a DPGP/1 claim form from the departmental Finance Section via email: [gpregallowance@londondeanery.ac.uk](mailto:gpregallowance@londondeanery.ac.uk) or download from the London Deanery website.

Providing there are no queries raised by your claim, and you have sufficient funds in the balance of your allowance, you will reimburse the requested amount. Reimbursement is up to a maximum of £465, even if your course fee is in excess of this amount. It normally takes 6 weeks for reimbursement claims to be processed through the Deanery Finance Department. Claim forms should be sent to:

Educational Allowance Administrator  
London Deanery, GP Department  
Stewart House  
32 Russell Square  
London WC1B 5DN

## **Revision And Educational Courses During Your Registrar Year**

### **nMRCGP revision courses**

Opinions are mixed about nMRCGP courses for the AKT and CSA. There are many good books available for both exams, many available from either the QEHL library or the RCGP library (who will send the book out to you at no extra cost!)

**AKT:** PasTest, [www.passmedicine.com](http://www.passmedicine.com)

**CSA:** Cases and Concepts for the new MRCGP By P. Naidoo; and  
Get Through New MRCGP: Clinical Skills Assessment by Bruno Rushforth, Val Wass

In terms of Hot Topics courses: the NB medical course ([www.nbmedical.co.uk](http://www.nbmedical.co.uk)) is recommended by some salaried Doctors, and previous GPRs

Talk to your GP trainers, talk to ex-GP registrars to see which courses they went on.

## Other Courses

There is a wide range of educational courses for GP registrars. This includes consultation/communication courses, minor surgery courses, family planning courses, acupuncture courses etc. etc. London Deanery supported courses can be found at: [www.londondeanery.ac.uk/gp/courses\\_conferences/index](http://www.londondeanery.ac.uk/gp/courses_conferences/index)

Most trainers would encourage you to do the DFFP theory course. This covers most aspects of family planning but also overlaps with some gynaecology. Some of you may have already done it during your SHO years, if not I would strongly advise you did in your registrar year, as you will see a lot of family planning in practice. It is a 3-day course that normally costs £300+ but if you apply through the London Deanery they subsidise you & you just pay £190. Check the Deanery website for local courses.

Child Health Surveillance (CHS) courses cover everything from immunisations to developmental milestones. There is a wide array of such courses out there including:

- The Imperial College London CHS course (costs £290)  
See: [www.symposia.org.uk](http://www.symposia.org.uk) or email [sympreg@imperial.ac.uk](mailto:sympreg@imperial.ac.uk) for further details.
- The other one, is run by the Southwark PCT (costs £250)  
Contact:  
Training Administrator  
Southwark PCT NHS Trust  
Wilfrid Sheldon Centre  
St Giles Road,  
SE15 7RN  
Telephone: 020 7771 3332

Child Protection Training is also useful in today's climate & CHS courses do not cover it in great detail. Luckily in Greenwich there are free courses (basic & advanced training), which are run at several points during the year. The basic training is half a day, the advanced a full day. For further details contact:

Child Protection Office  
Adhikaar centre  
93 Tudway Road  
Kidbrooke  
SE3 9YG  
Telephone number: 020 8319 3430, or

Email [helen.jakeway@nhs.net](mailto:helen.jakeway@nhs.net), child protection officer at QEH

If you have any study leave left after this you could do something else that interests you i.e. ENT, Rheumatology, Acupuncture courses or you may just decide to take a few days private study leave before the nMRCGP exams.

## Suggested Reading

Apart from revision books you should also do some background reading regarding the nature of general practice:

### Communication/Consultation

Most trainers would say the following books are essential reading for registrars. They are helpful in developing patient centred consultations plus issues raised in these books tend to come up in exams.

The Doctor's Communication Handbook (2003)– Tate P – Radcliffe Medical Press

The Inner Consultation 2<sup>nd</sup> Edition (2005)– Neighbour RH – Radcliffe Medical Press

The Doctor, his Patient and the Illness (1957)– Balint M – Pitman Paperbacks

The New Consultation: Developing doctor-patient communication (2003)– Pendleton D, Schofield T, Tate P et al – Oxford University Press

### General texts

The Oxford Handbook of General Practice– Simon C, et al  
(Covers most aspects of general practice in a concise way – every registrar has it)

Symptom Sorter (1999) – Hopcroft K & Forte V  
(States differential diagnosis, investigations & red flags for common GP problems)

How to Read a Paper: Basics of Evidence Based Medicine- Greenhalgh T – BMJ books  
(Widely admired book. Explains a difficult topic very clearly)

## Useful Websites

[www.greenwichgptraining.org](http://www.greenwichgptraining.org)  
(The VTS website- helpful links)

[www.pmetb.org.uk](http://www.pmetb.org.uk)  
(Registration with the PMETB)

[www.londongptraining.com](http://www.londongptraining.com)  
(The committee's website)

[www.bma.org.uk](http://www.bma.org.uk)  
(Contracts & your rights)

[www.londondeanery.ac.uk](http://www.londondeanery.ac.uk)  
(Contains information re: ST3 Courses)

[www.gpnotebook.co.uk](http://www.gpnotebook.co.uk)  
(Basically a GP textbook online)

[www.rcgp.org.uk](http://www.rcgp.org.uk)  
(e-portfolio, nMRCGP)

[www.lmc.org.uk](http://www.lmc.org.uk)  
(The Local Medical Committee - represent GPs to the PCTs)

## **If you are having problems**

I hope your registrar year goes smoothly, but occasionally problems arise. These may be personal, problems with patients, problems with your trainer, problems with other nurses or doctors or you may just feel your not coping with things. Always remember there are a lot of people there to support you. You may want to talk to other registrars because they may have had or have similar problems. Try speaking to your trainer they are not just there to look after you educationally but to look after you holistically. If you cannot do this, speak to Dr Wheeler, Dr Cristofoli, or Dr Divall as VTS organizers they are always receptive.

If you feel your problem cannot be resolved at the local level you should contact the Associate Director of Vocational Training for Outer South East London –

Dr J. Spicer:

Email [jspicer@londondeanery.ac.uk](mailto:jspicer@londondeanery.ac.uk)

Secretary's telephone number – 020 7866 3251

## **Finally**

We hope you have found this booklet useful. However there is always room for improvement so if you have any suggestions regarding any changes or additions you would like, please let us know.

Thanks Niraj & Junaid