Accreditation of Transferable Competences
Frequently Asked Questions

Many of the core competences are common across different curricula. When moving from one approved training programme to another, a trainee doctor who has gained competences in core, specialty or general practice training may not have to repeat training already achieved. The Academy of Medical Royal Colleges has developed the Accreditation of Transferable Competences Framework (ATCF) to assist trainee doctors in transferring competences achieved in either core, specialty or general practice training programme, where appropriate and valid, to another training programme. This will save time for trainee doctors (a maximum of one year) who decide to change their career path after completing a part of one training programme, and transfer to a place in another training programme.

For details of the full report please see the Academy of Medical Royal Colleges website.

Trainees FAQ’s

**What is Accreditation of Transferable Competences (ATC)?**
ATC is a framework for trainees changing career direction so that they don’t have to repeat the training they have successfully completed. Many training curricula have shared competences. If you have successfully achieved some of these, and you change specialty, you shouldn’t have to do them again.

**What specialties can be counted towards Psychiatry?**
It has been agreed by the GMC and the Academy of Medical Royal Colleges that trainees who have a successfully completed a minimum of one-year training in the following specialties can have that training country towards Psychiatry:

- Core Medical Training
- Paediatrics and Child Health
- General Practice
- Public Health

**How do I apply for ATC?**
For candidates applying from February 2018 through National Recruitment there is a tick box on the application form. If the application is successful, it will flag it up to the Deanery and should be discussed with the TPD and at ARCP.

**What are the requirements for applying for ATC?**
You must have successfully completed at least one whole time equivalent year in the first specialty before elements of that training can be used for ATC when entering Psychiatry.

**Do I have to have ARCP outcome 1 in the first specialty to use ATC?**
In most cases, yes. If you do not have an ARCP outcome 1, then you will need to provide evidence of successful completion of the competences in the original training programme for ATC into the second programme.

**Can I retrospectively count time in another training programme?**
No. You may only apply for ATC at point of entry into Psychiatry.
**Will ATC make it easier for me to gain a place in Psychiatry?**
No. If you wish to change career direction, you will have to apply for a place in Psychiatry in open competition. Naturally, any previous work experience which you have done may be seen positively when you apply. This is not the purpose of ATC and is not scored in the selection process.

**Will ATC make my training take longer?**
If you are applying to start in Psychiatry, you can count competences from approved previous training. This can reduce the time in core training by allowing up to 1 year of experience from the previous specialty.

**Do I have to use ATC if I change to a different specialty?**
No. You can choose whether you want your previous training to be considered for ATC, but only at point of entry, not at any later date.

**Do I still have to complete all the examinations if changing to Psychiatry?**
Yes, all examinations will have to be taken and passed to progress to ST4 training.

**Can ATC be applied to competences gained in a LAT post?**
Yes.

**Can ATC be applied to competences gained in service, LAS or experience posts?**
No, only training in GMC approved training programmes may be considered.

**Can ATC be applied to competences gained in training outside the UK?**
European training may be accredited providing it was in a mutually recognised programme and evidence of competences achieved can be provided. This is following the same rules as those for European training being counted for entry into the same specialty.

**I have had a gap between my previous specialty training and the new one. Can I use ATC?**
The maximum time out of training will be 3 calendar (not whole time equivalent) years. In exceptional circumstances, this may be extended to 5 years, but the intervening time must have been in clinical practice.

**Is there a time limit for application for ATC?**
Yes. You may only apply for accreditation for competences gained during training up to a maximum of five years before the time of application for ATC.

**What is the maximum period that can be allowed under ATC in Psychiatry?**
One year.

**Can I apply for ATC more than once?**
No.

**I am already in training; can I apply for ATC now?**
No, you may only apply for ATC at National Recruitment (from February 2018 onward).

**When do I know if I am allowed ATC?**
When you apply for entry into the second specialty, you will be asked to state your intention or express an interest in ATC. The details of ATC will be agreed with you, after you have successfully achieved a place in a Psychiatry Training post. They should be agreed, at the latest, within three months of starting the second specialty. ATC can, in special circumstances, be changed at the first ARCP.
I am changing career direction. If I use ATC will I miss some bits of the curriculum in my second specialty?
No. To gain CCT in General Practice or any Specialty, you must achieve all the competences in the curriculum. ATC is used to gain credit for competences you have successfully achieved in a previous specialty.

If I start in the 2nd year of this second specialty, I will not have enough time to take the examinations. What should I do?
Do not use ATC. ATC should only be used when it is helpful to you and your training.

What happens if I enter a new specialty in the 2nd year, and things do not go as well as expected. I will not be ready for CT3 at the end of the year.
The use of ATC for each trainee will be reviewed at the 1st ARCP. At that time, the panel may decide to alter or reverse previous decisions about ATC. If ATC was rescinded, then you would effectively enter CT2. The ARCP outcome will be determined in the usual way, and the need to rescind ATC does not preclude ARCP outcome 1.

What is a gap analysis?
This allows you to agree specific learning objectives which must be achieved within a certain time in the new specialty. This might relate to the content or context of the previous training. It might be a single specific skill or an area of training this should be discussed with your TPD.

Why is ATC reviewed at the ARCP in the second specialty?
This is an important checkpoint. Sometimes, it may be best for training to be repeated in the context of the second specialty. The agreed reduction in training time in the second specialty may no longer be in a trainee’s best interests.

How will information from ATC be recorded in an e portfolio in the second specialty?
This should be discussed with your educational supervisor. Specific learning objectives highlighted by the gap analysis should be recorded in the personal development plan to ensure that these are achieved.

Programme Directors and Deanery FAQ’s

Does ATC need prospective approval?
Yes. Trainees entering training will be highlighted once accepted onto the training programme. The details for the individual trainee are administered by the LETB/Deanery.

How do we know if trainees are seeking to use ATC?
At application for Core Psychiatry training, the trainees will signal their intention to use ATC on their application form in order to be considered for it.

When does ATC need to be agreed with the individual trainee?
ATC should be agreed with the individual trainee after successful appointment to the second specialty. ATC must be agreed at the latest within three months of starting training in Psychiatry.

Do I need to respond to a request for details of how much time will be counted by ATC before a trainee has received confirmation of appointment to Psychiatry?
You are advised not to provide this information. The acceptance of ATC only becomes effective when a trainee is accepted into a Psychiatry training post. ATC may change with any
modifications to the curriculum or in the interval before the trainee is accepted into the second specialty.

**How do we use the gap analysis?**

The gap analysis allows definition of areas of training which the trainee must complete within a specified period after entry into Psychiatry. This may relate to specific skill or could be a statement.