Wessex Deanery
Guidance on
RITA = Record of In-Training Assessment

Trainees appointed to specialist training programmes in 2006 and earlier

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Introduction

Trainees who were appointed up to and until December 2006 as Specialist Registrars (SpRs), General Practice Registrars (GPRs) and Public Health Medicine Specialist Trainees (SpTs) follow the curricula relating to those training programmes.

These trainees also follow the guidance in the Department of Health’s The Guide to Specialist Registrar Training (the “Orange Book”, published February 1998). This Guide explains in detail exactly what trainees can expect at various stages of their SpR training programmes, from entering the grade, through the assessment process to the conclusion of training and then leaving the grade.

GP registrars will follow the Department of Health’s The GP Registrar Scheme Vocational Training for General Medical Practice, the UK Guide (the “Green Book”, published March 2000). This guidance contains the arrangements for the GP Registrar Scheme, the system of vocational training for general practice in the United Kingdom which is designed to take doctors to the point where they are 'suitably experienced' to work in general practice.

Therefore, there are still SpRs on specialist training programmes who are involved the Record of In-Training Assessment (RITA) until the end of their training and the Orange Book still applies to them. The Green Book applies to GPRs who will receive VTR forms (Vocational Training Regulation (VTR) forms which are Statements of Satisfactory Completion of Training for hospital posts approved for GP training and for GP Registrar training).

Scope

RITA is a record of ongoing assessment within a training post. It is not an assessment in itself. The documentation of this assessment is therefore crucial to the decision making process.

- The assessment takes place during training and is work based and ongoing.

- The assessment should cover all the skills and knowledge, both generic and specialty specific as well as the 'softer areas' of attitude, judgement, team working, interpersonal relationships and clinical wisdom.

- Assessment methods comprise direct observation of the trainee, discussion with and supervision of the trainee, feedback from colleagues, patients, carers as well as self-assessment.
• The main person carrying out the assessment will be the educational supervisor.

**During the training phase:-**

• Educational objectives and a structure for educational supervision, appraisal and assessment should be agreed between the trainee and the educational supervisor as early as possible after starting a new post.

• There should be regular educational supervision sessions during which ongoing assessment should take place and the educational objectives should be reviewed.

• Appraisal should take place at least at 3 monthly intervals.

• Agreed assessment documentation should be completed jointly and in good time, and there should be no surprises to either trainee or educational supervisor at the annual RITA review.

**Annual RITA Review**

• Documentation should have been received and read by the RITA panel before the review meeting

• No RITA review should take place without the assessment documentation being available

• No RITA ‘D’ or ‘E’ will be countersigned by the Postgraduate Dean without adequate documentation of the assessment leading to the decision to award a RITA ‘D’ or ‘E’

• At the RITA review the decision regarding the appropriate RITA form should be made at the beginning and should only take a short time since all the documentation will have been available and read beforehand. Theoretically, it should be possible to make this decision without the trainee being present. If the trainee is present the decision should be communicated to the trainee as soon as possible and the signing of the appropriate RITA form completes the actual RITA review

• The Chairman should make it clear to the trainee that the RITA review is completed at this point

Although not part of the official RITA review, the panel may then like to use this annual meeting to do the following:

i) Seek feedback from the trainee about the current post

ii) Review the trainee’s progress to date throughout the rotation
iii) Identify further training needs
iv) Plan the next and future posts

This discussion is likely to be of more value if the decision regarding the appropriate RITA form has already been made and the trainee does not need to be concerned if he/she wants to provide some critical feedback of their current post.

**After the RITA review**

- Written feedback should be provided to the trainee, their current educational supervisor and their next educational supervisor
- It is crucial that details of all RITA D&E decisions are communicated to the next Educational Supervisor so that the educational objectives for the next post can be informed by the RITA outcome
- The trainee will receive a paper copy of their completed and signed RITA form from the Deanery, after the RITA review. This should be stored in the trainee’s Portfolio, year on year
- RITA documentation is sent to the appropriate Royal College by the Deanery on behalf of the trainee

**Definitions**

Terms applicable to specialist registrar trainees are:

- Specialist training
- Specialist Registrars (SpRs), General Practice Registrars (GPRs) and Public Health Medicine Specialist Trainees (SpTs)
- The Guide to Specialist Registrar Training (the “Orange Book”) and The GP Registrar Scheme Vocational Training for General Medical Practice, The UK Guide (the “Green Book”) for specialist training
- Record of in-training assessment (RITA) and Vocational Training Regulation (VTR) forms.