

CESR – How to get started

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With the Dermatology workforce being at a shortage, specialty doctors are commonly recruited to support the Dermatology department. Experience amongst specialty doctors varies greatly, with some very well-trained with skills that make them capable of stepping up to senior leadership and management roles. Whilst some feel satisfied in their current roles, there are others who are considering achieving the Certificate of Eligibility for Specialist Registration (CESR) in Dermatology. Therefore, the focus of this article will be directed at the latter group requiring further guidance to get started.

Why CESR?

The process of getting a successful CESR application appears very daunting. A huge advantage of having CESR is GMC recognition that you have the same knowledge, skills and experience as a Dermatologist, equivalent to those who have done an approved training programme. Obtaining CESR also means that you are free to apply for a Consultant post which benefits greater responsibility and trust in taking more senior management and leadership roles, better recognition of your contribution and expertise in Dermatology, as well as potentially being in a better financial situation long-term.

What are the obstacles?

The task of working towards a CESR application is arduous, as it is meant to be robust to maintain our high standards of Dermatology Consultants in the UK, and this requires very good organisational skills and strong motivation throughout. Time may be against you, as the evidence you submit should preferably be no older than 5 years. It is not uncommon to be spending evenings and weekends compiling the evidence to ensure minimal delay in submission whilst being able to demonstrate equivalent competencies to those of a trainee. Study leave will be limited compared with trainees, therefore you may find yourself needing to sacrifice some annual leave days for external study to achieve essential competencies. Alternatively, you may choose to use your admin PA sessions to sit or partake in specialist clinics or readjust your job plan to accommodate what is needed.

If there are trainees already working in your department, you already have the advantage of working alongside them to know what is required of them during their training and potentially match their experience, particularly if there are certain courses trainees are habitually attending. This could potentially be motivating for you, as one can discuss any difficulties or challenges in achieving competencies that could be resolved together as a team.

Is it too late to apply for CESR?

In my view, if you are currently practising in your Dermatology Department and are able to meet or exceed the level of experience of a trainee, it is not too late. It is understandably off-putting if you are well established in your current job and many would have achieved their core medical competencies or their MRCP much earlier than 5 years ago. Providing more recent evidence is possible through demonstrating the fact that you are still actively using that core medical knowledge in your day to day practice which can be supported through workplace-based assessments (WBPA) and reflections. A very good example would be reviewing acute referrals from other specialties requesting Dermatology advice which demonstrates application of core medical training knowledge through clinical examination and interpretation of investigations to determine cause of cutaneous presentation.

Where do I start?

A checklist (figure 1) has been created to help provide the basic tools needed to get started. Being familiar with the CESR process and the Dermatology Curriculum will put you in good stead and the e-portfolio is a very worthy investment to keep track of what evidence you can offer for every single element of the Curriculum. The e-portfolio also has a personal library section where you can upload any evidence electronically for you to reference to later on when you make your application, especially as all new CESR applications since November 2018 must be submitted electronically. This is also a useful source for your annual appraisals which should be up-to-date and are required in your CESR application.

I recommend starting collection of your evidence early, as it would save time later

Checklist on getting started with CESR (not exhaustive)

- ✓ Get familiar with the CESR process by reading the specialty specific guidance for Dermatology on the GMC website
- ✓ Invest access to the JRCPTB e-portfolio to keep track and upload evidence and record reflections
- ✓ Use the latest Dermatology ARCP Decision Aid as your guide to progress in achieving the minimum competencies
- ✓ Take advantage of all educational and learning opportunities – ward rounds, clinic and case reflections, journal clubs, referrals, MDT, on-call, undergraduate teaching, etc
- ✓ Keep annual appraisals and CPD diaries up-to-date
- ✓ Have a nominated mentor or educational supervisor
- ✓ Attend a BAD CESR workshop

Figure 1

on when you come to compile everything (figure 2). Patient and colleague details should also be anonymized prior to submission. Meeting the requirements of

Example documents for CESR submission (not exhaustive)

- CV in GMC format
- Annual appraisals and CPD diaries
- Job plans
- Clinical and surgical logbooks, cumulative logs
- Example case histories
- WBPA
- Audits
- Teaching evidence and timetables
- Feedback – patients, colleagues
- MRCP / evidence of CMT competencies – on-call, e-learning, WBPA, etc
- Management / leadership roles
- Specialty Certificate Examination (SCE)
- Hospital / caseload statistics

Figure 2

Continued overleaf...

the ARCP Decision Aid will ensure that you are demonstrating equivalency to that of a trainee through being able to produce the minimum number of WBPAs, audits and teaching observations as well as patient and colleague feedback. There is a specific format for logbooks as stated in the GMC CESR guidance and examples of surgical logbooks can be found on the British Society for Dermatological Surgery (BSDS) website. If you haven't got an appropriate Master's degree or other Dermatology qualification, passing the Specialty Certificate Examination is a huge advantage in demonstrating knowledge and could be mandatory in future CESR applications like the current Dermatology Trainees.

Let your Consultants know of your intention to apply for CESR and guide them through this process. From personal experience, most Consultants are willingly

supportive of CESR applicants but do rely on your guidance on what needs to be arranged as this process is likely to be unfamiliar to them. Do also review your job plan regularly and offer suggestions on how it can be adjusted to meet your personal training needs, including any time required to attend another department or hospital. Furthermore one would expect a CESR applicant to have taken on a leadership or management role by the time of application so make sure this is also incorporated.

Finally attending the BAD CESR workshop is highly recommended, preferably at first when considering it and a second time for when you are close to submitting. This workshop runs 2-3 times a year and is run jointly with GMC representatives and Dermatologists to go through the application process, provide examples of successful applications and answer any

specific questions. Whilst it is a good way of keeping up-to-date with the application process, I would still recommend checking on any news on the GMC website itself. The most recent changes seen over the last 2 years since I've attended a workshop were the number of referees reduced from 6 to 4, the introduction of a single proforma for ease of validation instead of stamping / signing all pages of evidence and also introduction of the electronic application form.

Lastly...

The process should feel more like a marathon than a sprint – it seems like a long journey and as long as you keep up with the pace, the feeling of reaching that finish line should be rewarding. It is vital to keep motivated to stay on track to see it through and hopefully you won't feel short of support from colleagues, family and friends.