

## EPALS Regulations July 2019 Version 1.1

### 1 General

- 1.1 All Educators, Course Directors, Instructors and Instructor Candidates must abide by the [Resuscitation Council \(UK\) Code of Conduct](#). Any profit made from EPALS provider courses should be used only for purposes directly related to resuscitation.
- 1.2 Instructors must be aware of and follow the recommendations in the [Equal opportunities policy](#).
- 1.3 Instructors must be aware of and follow the recommendations in [Guidance for managing a candidate whose performance raises serious concerns for patient safety](#). This provides guidance on how to assist Course Directors, Medical Directors and faculty where there are concerns about a candidate's clinical safety, to the extent that they may be a danger to patients.
- 1.4 The Resuscitation Council (UK) [RC (UK)] discourages the payment of Honoraria and advises, in the interests of probity, that any such payment should be made through the Trust's Finance Department. For further guidance please see the [Payment of Honoraria to Resuscitation Council \(UK\) Instructors](#) statement.

### 2 EPALS Course Centres

#### 2.1 General information

- 2.1.1 Only an approved Course Centre may run the EPALS course. A Course Centre is regarded as the administrative centre from which the EPALS provider course is organised, rather than the geographical location of where a course is delivered or the person organising it. For example, a Trust that has three hospital sites but organises courses centrally from one site need only register as one centre.
- 2.1.2 Where a Course Centre delivers a course at a new location, the Course Centre is responsible for ensuring that the facilities at the new venue are adequate.
- 2.1.3 If a Course Centre does not run a course for more than two years, its approval will lapse and a new application must be made to the EPALS Subcommittee.
- 2.1.4 Where concerns about individual Course Centres have come to light, the centre may be re-assessed and reviewed at any time at the discretion of the EPALS Subcommittee.
- 2.1.5 The EPALS Subcommittee reserves the right to revoke Course Centre validation.

## 2.2 *Data Protection*

2.2.1 All Course Centres must comply with Data Protection regulations and local policies with regards to the storage, handling and disposal of personal details (e.g. addresses, payment details and photographs etc). These should ideally be disposed of or securely stored as per local policy after the course returns have been completed.

## 2.3 *New centres*

2.3.1 Applications to become a Course Centre should be made in writing to the Resuscitation Council (UK) using the Course Centre application form.

2.3.2 Applications will be reviewed by the EPALS Subcommittee

2.3.3 The first course run by any Course Centre must be assessed by a Resuscitation Council (UK) EPALS course assessor who must be present for the entire course.

2.3.4 The date of the centre's first course must be set in liaison with the EPALS course assessor. A full faculty list (submitted via the LMS) and programme must be sent to the RC (UK) for this first course at least six weeks prior to the start date of the course.

## 2.4 *Centre reassessment*

2.4.1 Course Centres shall be re-assessed by members of the EPALS Subcommittee at least every four years. At each meeting, members shall review a set number of Course Centres.

2.4.2 The Resuscitation Council (UK) will pay all reasonable expenses for EPALS course assessors. The EPALS course assessor should claim these from the Resuscitation Council (UK) rather than the Course Centre.

2.4.3 EPALS course assessors must not be counted as faculty. If, however, they decide to teach, their attendance will be counted towards their teaching requirements.

2.4.4 Course Centres must not be assessed by their own Course Director acting in the capacity of an approved EPALS course assessor.

## 3 *Course Organisation*

### 3.1 *Pre-course information*

3.1.1 The minimum number of candidates is 12 and the maximum is 30 (groups of 6). Please contact the Resuscitation Council (UK) if you have less than the minimum number of candidates.

3.1.2 A maximum of 4 re-certification/reassessing candidates can be accommodated on Day 2 bringing the total to a maximum of 34.

3.1.3 Each EPALS provider course date must be registered with the RC (UK). All Course Centres must upload and complete the course approval form on the LMS **at least six**

**weeks** in advance of the proposed course date. Only courses with fully completed will be processed (e.g. Medical Director/Course director/ valid purchase order number). Courses will not be approved if these criteria are not met. Late applications will not be granted approval, except in exceptional circumstances.

- 3.1.4 The Course Administrator must complete the course notification form on the LMS thereby confirming and accepting responsibility that the centre will run the course in accordance with the criteria set out in these regulations. Manuals will be dispatched once the course has been approved.
- 3.1.5 A registration fee is payable for each candidate in addition to the cost of the course materials.  
The RC (UK) will not provide refunds or credit on unused registrations. If a course is cancelled registrations can be transferred to a future course. Course Centres notify the RC (UK) of cancelled courses and make arrangement to use the registrations at the earliest possible juncture.
- 3.1.6 Registrations are not transferrable between course (e.g. EPALS to ALS).
- 3.1.7 Transferred registration can only be used once. Any registrations not used on subsequent courses cannot be carried forward.
- 3.1.8 Course fees are set locally. These should take into account costs of running the course but also the current financial climate within the health system and the availability of funding.
- 3.1.9 It is the Course Director's responsibility to ensure that all Instructors are registered with the RC (UK) and have a valid EPALS Instructor certificate.
- 3.1.10 Course Directors must ensure that faculty are enrolled prior to the commencement of the course and have access to the LMS and course materials.
- 3.1.11 If, on any occasion the course criteria are not met, future courses at that centre may have their registration withdrawn or future registrations may not be accepted.
- 3.1.12 Course Administrators should only enrol a candidate on the LMS once they are confident that the candidate will be attending that course and anticipate no changes. Course administrators must only create new accounts after checking there are no existing profile for the candidate. Course administrators are also responsible for ensuring that all candidate information is entered correctly when creating their accounts on the LMS. Candidates will receive instant access to the e-learning materials once they are enrolled.
- 3.1.13 **At least four weeks** before the course start date candidates must also be given:
- The EPALS course assessment forms
  - The EPALS course manual
  - Local centre information and provisional programme

- 3.1.14 Automatic notifications will be sent to candidates one week before they attend the face-to-face course to remind them that they must submit their completed pre-course MCQ paper before attending the face-to-face course.
- 3.1.15 Course Directors are strongly advised to check on all candidates' progress on the LMS at least two days before the course. If a candidate has not accessed the pre-course MCQ, the centre should contact them urgently and remind them to do so before attending the face-to-face element.
- 3.1.16 Candidates should be made aware that the RC (UK) and course administrators are able to track whether they have accessed and completed the materials.

## 3.2 *Candidate eligibility and certification*

- 3.2.1 The EPALS course is designed for healthcare professionals who would be expected to apply the skills taught as part of their clinical duties or teach them on a regular basis. Appropriate participants include doctors, nurses and paramedics working in direct contact with children.
- 3.2.2 All applicants must hold a professional healthcare qualification, or be in training for a professional healthcare qualification, or waiting to join a UK healthcare professional register.
- 3.2.3 Medical students should be encouraged to complete a pILS course. Medical students in their final year of training can be accepted as candidates on an EPALS course provided they do not exceed 10% of the total number of candidates. A minimum of 25% of the candidates must be medically qualified. Medical students are not medically qualified.
- 3.2.4 Candidates who have successfully completed all the assessments and attended the entire course will receive a Resuscitation Council (UK) EPALS provider certificate valid for 4 years.
- 3.2.5 Candidates with disabilities are eligible to undertake the Resuscitation Council (UK) EPALS provider course. Please refer to the "Equal opportunities" policy for further guidance. Candidates should notify the Course Director of any disability before the start of the course and the Course Director should then make reasonable efforts to accommodate the candidate's requirements.

## 4 *Candidate preparation*

- 4.1 Course Centres must provide the following advice to candidates concerning pre-course preparation:
- 4.2 Candidates are expected to have prepared for the course by reading the manual and accessing the pre-course MCQ.

- 4.3 Candidates have a professional responsibility to act with probity. For example, where candidates are given study leave to attend an EPALS course and/or have their costs paid by their employer or educational provider, employers and educational providers have a reasonable expectation that those candidates will prepare adequately for attendance at the face-to-face element of the course by reading the manual and completing the pre-course MCQ paper.
- 4.4 Candidates must be present throughout the face-to-face element of the course in order to complete it successfully.
- 4.5 The pre-course MCQ paper should be completed before the start of the course. The resulting mark does not contribute to the final course result. To complete the course, candidates must have a score for the pre-course MCQ paper.

## 5 Faculty

### 5.1 *Medical/Course Director requirements*

- 5.1.1 Each course must be led by a Course Director and must have a Medical Director (who may also act as the Course Director). The Course Director and Medical Director are responsible for ensuring the smooth running of the course.
- 5.1.2 The Course Director must ensure that records are kept during the course and is responsible for providing the Course Director's report at the end of the course. The Course Director is responsible for ensuring that the course fully complies with the EPALS provider course regulations. Where the regulations are not met, the Resuscitation Council (UK) may retrospectively withdraw the course approval.
- 5.1.3 The Course Director must ensure that the faculty are familiar with the current course regulations and course materials which will be available on the LMS.
- 5.1.4 The Course Director and Medical Director, both of whom must have been approved by the RC (UK) to direct EPALS courses, must be present throughout the course. At least one other medical Instructor must be present throughout the course.
- 5.1.5 Any incident or concerns should be initially dealt with locally and must be documented fully in the Course Director's report. Further guidance and support is available from the RC (UK).
- 5.1.6 The Medical Director must be medically qualified and a minimum of Associate Specialist grade in a speciality allied to acute paediatrics, and credible to fulfil the position of medical lead on an EPALS course.
- 5.1.7 The Medical Director (if he/she is not also the Course Director) should work alongside the Course Director to ensure that the course is run in accordance with the regulations. The Medical Director has certain additional responsibilities as outlined in [Guidance for](#)

[managing a candidate whose performance raises serious concerns for patient safety](#) during RC (UK) courses.

- 5.1.8 Applications to become an approved Course Director or Medical Director should be made on the Course Director Application form.

## 5.2 *Faculty*

- 5.2.1 Each course should have a multidisciplinary faculty.
- 5.2.2 A minimum of two of the faculty must be medically qualified, one of whom may be the Medical Director. Both must be present for the entire course. The second medical member must be a full EPALS Instructor.
- 5.2.3 The RC (UK) strongly encourages all centres to reflect the constituency make-up of the candidate group within the faculty (e.g. 50% of a single profession within the candidate group supported by strong faculty representation from the same professional group). The benefits of multidisciplinary learning are maximised when this is achieved.
- 5.2.4 There should be at least one faculty member to every three candidates for each day of the course. For example, a course running with 24 candidates requires a minimum of eight faculty members.
- 5.2.5 The number of Instructor Candidates (IC) on the faculty should not exceed one third of the total number of EPALS Instructors. There is no limit to the number of recertifying instructors.
- 5.2.6 At least 50% of the faculty should be present throughout the course.
- 5.2.7 APLS Instructors may teach on EPALS provider courses. APLS instructors should observe an EPALS course prior to commencing their EPALS ICs. Access to the LMS and teaching materials must be sought from the EPALS Co-ordinator.
- 5.2.8 European Resuscitation Council EPALS instructors are eligible to instruct on RC (UK) EPALS courses.
- 5.2.9 Instructors must teach on at least 4 courses every 4 years, ideally one course per year. It is recommended that 1 of these should be outside their home centre.
- 5.2.10 It is recommended that Instructors should attend at least one Instructor Day every four years.

## 5.3 *Instructor recertification*

- 5.3.1 EPALS Instructors must recertify every 4 years.
- 5.3.2 Re-certification involves attending an entire EPALS provider course and being assessed as an Instructor Candidate during the delivery of a skill and simulation station and be involved in the practical assessments. The skill and simulation station should be formally assessed using the appropriate forms.

- 5.3.3 One course in every 2 years may be a Generic Instructor Course which has EPALS candidates attending or instructing on an ALSG APLS course (confirmation of teaching on an APLS must be sent to the Resuscitation Council (UK)).
- 5.3.4 EPALS instructors who teach on 2 pILS courses a year can count these towards 1 of their EPALS instructor requirements (i.e. 1 of the 4 EPALS courses in 4 years). In order to have this recognised they must inform the EPALS Co-ordinator in writing of the dates of the 2 pILS courses.
- 5.3.5 Instructors who have not maintained their Instructor status by teaching on four courses over four years must complete a [Lapsed Instructor form](#) and submit it to the EPALS Co-ordinator at the RC (UK).
- 5.3.6 Once reviewed and agreed, the lapsed Instructor will revert to Instructor Candidate status. It is rare for lapsed Instructors to be asked to attend a GIC course, however, in preparation for their teaching practices they may be given access to the online GIC modules. Full Instructor status will normally be achieved after the successful completion of two teaching practices. Once this has been achieved, their EPALS Instructor status will be re-instated and be valid for four years from the date of completion of their second assessment.
- 5.3.7 Instructors must be aware that their provider status is only valid as long as their Instructor certificate is in date. Once the Instructor certificate is out of date, provider status is no longer valid.
- 5.3.8 If the lapsed instructor undertakes a provider course and is not nominated as Instructor Potential, they will not be able to proceed to Instructor Candidate/Instructor status.
- 5.3.9 Instructors should keep a [professional development record \(PDR\)](#) form.
- 5.3.10 Instructors may recertify on the European Resuscitation Council (ERC) EPALS Provider courses. Instructors wishing to recertify the ERC courses must notify the RC (UK) prior to their recertification and ensure recertification assessments are forwarded to the RC (UK) following the course.
- 5.3.11 Instructors who are either medical or non-medical Course Directors may not recertify whilst acting in the capacity, unless they are assessed by a Courses Assessor.

## 6 Programme

- 6.1 The programme must be adhered to and the running order must not be changed.
- 6.2 The standard programme is based on 30 candidates split into 5 groups of 6.
- 6.3 The simulation sessions must be run sequentially so that all groups work through the simulations in the order designated in the standard programme.

- 6.4 The skill stations, workshops and simulation stations must be led by an at least 2 Instructors, these must have a full EPALS Instructor, additional Instructors can be EPALS recertifying Instructor or Instructor candidate under the direction of a full Instructor.
- 6.5 All the course materials are provided by the RC (UK) on the LMS. Course directors must ensure that the latest versions of materials are utilised and presented in the most appropriate format.
- 6.6 Limited additional teaching material may be provided by Course Centres on the understanding that it is appropriate and clinically relevant; this needs to be pre-authorised by the EPALS Co-ordinator prior to the course and detailed within the Course Director's reports.
- 6.7 It is the responsibility of the Course Director to ensure suitable allocation of the lectures and open discussions taking into account their credibility, knowledge base and Instructor requirements.
- 6.8 The Course Centre must supply, as a minimum, the equipment detailed in the 'Equipment list'.

## 7 Assessment

- 7.1 There are 3 assessment components on the EPALS provider course that candidates must pass to successfully complete the course:
- Paediatric BLS including high quality CPR with bag-mask ventilation
  - Assessment Simulation
  - MCQ
- 7.2 ***Paediatric BLS, Including high quality CPR with bag-mask ventilation continuous assessment***
- 7.2.1 These skills are assessed using summative assessment during the skills station and also monitored throughout the rest of the course.
- 7.2.2 At least one RC (UK) EPALS Instructor, and one other member of faculty, who is either a full Instructor or an Instructor Candidate/recertifying Instructor, must supervise these skill stations.
- 7.2.3 If the candidate fails to demonstrate competency, opportunities for additional practice and assessment are provided during other skill stations and teaching simulations throughout the course.
- 7.2.4 If a candidate has failed to achieve the competencies in either skill by the time of the assessment simulation, the candidate will fail the course and cannot re-sit these individual assessment components.



7.2.5 If a candidate has passed the objective assessment criteria (paediatric BLS including high quality CPR with Bag-mask ventilation) they must be given the opportunity to undertake the assessment simulation and MCQ.

### 7.3 *Assessment Simulation*

7.3.1 All candidates must be assessed using the **same** standardised assessment simulation, (i.e. from 1 of the 3 categories: Seriously ill child; Cardiorespiratory arrest and Trauma) as decided by the faculty.

At least one EPALS Instructor and one other member of faculty who is either a full Instructor or an Instructor Candidate must supervise each assessment station. Instructor Candidates can only lead an assessment under the supervision of a full Instructor

### 7.4 *Assessment Simulation Re-tests*

7.4.1 Each candidate who fails their initial assessment simulation is entitled to a re-test.

7.4.2 If a candidate fails, they should be re-tested using a different simulation **but** from the same category, (e.g. all candidates to be assessed using Cardiorespiratory arrest 1, and all re-tests using Cardiorespiratory arrest 2).

7.4.3 Re-tests should be conducted by a different Instructor pair. Ideally, these should be observed or delivered by the Course Director/Medical Director.

7.4.4 If a candidate fails the re-test they may be permitted to continue with the MCQ assessment if this has not been completed already.

7.4.5 If a candidate passes all other assessments but fails the assessment simulation despite re-testing they may be offered the opportunity of taking a third and final assessment simulation **within three months**.

7.4.6 Rarely, the faculty may recommend that a candidate would benefit from taking the entire course again rather than a third attempt. This decision must be documented within the Course Director's report and fully explained to the candidate. The candidate must be given the appropriate fail letter available on the LMS. The third CASTest may or may not be on a future course and the location of this should be determined locally.

### 7.5 *MCQ*

7.5.1 Post-course MCQ papers must not be loaned.

7.5.2 A total of 45 min will be allowed for the written paper and the pass mark is 74%. The MCQ paper must be undertaken under exam conditions with an invigilator present.

7.5.3 Answers must be confined to the answer sheet provided and all question papers must be handed in.

7.5.4 Course Centres must mark the MCQ answer sheets.

7.5.5 Candidates must use a black or blue pen or an HB pencil when filling in the answer sheet.

7.5.6 When the Course Centres mark the MCQ answer sheet a yellow highlighter pen must be used.

## 7.6 *MCQ retests*

7.6.1 If a candidate fails to achieve the pass mark on the MCQ but successfully completes their practical assessments on the course they may re-take their MCQ paper under invigilated conditions within 3 months.

7.6.2 If the candidate fails to achieve the pass mark on this occasion they have failed the course.

## 7.7 *Candidate recertification as an EPALS provider*

7.7.1 The EPALS provider certificate is valid for four years. If providers have not recertified before one year after the expiry of their certificate they must attend a full EPALS provider course again.

7.7.2 EPALS providers may recertify by:

- successfully undertaking a full EPALS provider course or
- successfully completing the whole of day 2 of an EPALS provider course including an assessment simulation and the MCQ. Instructors will ensure that BLS and BMV is assessed as continuous assessment.

## 8 *Instructor potential (IP)*

### 8.1 *Credibility and nomination process*

8.2 Candidates who show exceptional ability, aptitude and credibility may be considered for Instructor training ([see 'IP appraisal form'](#)).

8.3 Medical candidates recommended for Instructor Potential must have completed FY2 level and have exposure to paediatric patients within their clinical placement

8.4 Candidates are eligible for consideration for Instructor training only after being nominated and seconded by Instructors at the final faculty meeting. The whole faculty should then discuss each nominated candidate's performance using the IP appraisal form and guidance. For candidates who have expressed an interest in becoming an Instructor, before or during the course, an IP appraisal form must be completed and retained if the candidate is unsuccessful. Often these candidates write enquiring why they were not selected and completion of a form may make the reasoning clear. Information on candidate progress should be collated during the course on the continuous assessment score sheet.

- 8.5 Recommendations for IP should ideally be unanimous, but if only one faculty member is opposed, the Course Director may make the final decision.
- 8.6 IPs should be encouraged to attend a Generic Instructor Course (GIC) as soon as practicable after nomination but are eligible to undertake the GIC as long as they have a valid provider certificate (i.e. within four years of the date of the course where they gained IP recommendation).
- 8.7 It is strongly recommended that IPs gain experience by observing one EPALS Provider course before undertaking the GIC.
- 8.8 Candidates who are considered for IP status on an EPALS course must hold a professional registration (e.g. GMC, NMC, HCPC). Those candidates who only have access to a voluntary register (e.g. Clinical Physiologists, Physician's Assistants), whilst able to undertake the EPALS course if appropriate to their role, are not eligible for IP nomination at this time. If any group subsequently gains professional registration the decision for that group would be reconsidered by the EPALS Subcommittee.
- 8.9 All IP Appraisal Forms must state the candidate's professional healthcare registration number.
- 8.10 Those candidates who are already Instructors on another recognised provider course should be identified by the Course Director at the earliest opportunity. Should they express a wish to become an EPALS Instructor they do not need to be nominated and seconded but should be assessed using the IP appraisal form.
- 8.11 Those recommended as having IP should be informed immediately after the course and issued with guidance for progression to the GIC.
- 8.12 All recommendations for IP must be marked clearly on the result sheet and named individually in the Course Director's report.
- 8.13 Only in exceptional circumstances are more than three recommendations for IP expected from a course. The Course Director must justify in the written report a decision to recommend more than this number.
- 8.14 Candidates who show exceptional ability, aptitude and credibility may also be considered and nominated for Paediatric Immediate Life support Instructor training via the Selection of ILS, pILS Instructors on ALS & EPALS' form. See [instructor process](#) journey.
- 8.15 Those recommended as having IP and who have successfully completed an approved GIC (or ATLS /ATNC Instructor course) may proceed directly to Instructor Candidate status. These candidates must be encouraged to contact the GIC coordinator directly.
- 8.16 If a candidate is IP'd on an EPALS course and has previously successfully completed a GIC for a different provider course, but not gone on to become a full Instructor for that

course, he/she does not need to repeat the GIC if the timeframe for that GIC is within two years of the EPALS course date.

- 8.17 The AHA PALS Instructor certificate is not valid for entry at Instructor Candidate level

## 9 Instructor candidates (IC) regulations

### 9.1 General IC regulations

- 9.1.1 Instructor status requires a candidate to:
- 9.1.2 complete successfully a provider course and be nominated as having Instructor Potential
- 9.1.3 complete a GIC (or recognised equivalent) successfully
- 9.1.4 complete two teaching practices as IC successfully.
- 9.1.5 Candidates are not permitted to undertake their provider, GIC and teaching practices at the same centre. A maximum of two of the three elements may be completed at the same centre. Please note that teaching practice(s) count as one element.
- 9.1.6 After successful completion of the GIC, all ICs must register to attend as IC on a maximum of two RC (UK) accredited Provider courses and teach satisfactorily on both before full Instructor status is granted and a certificate issued. Instructor Candidates must bring their GIC logbooks to all teaching practices.
- 9.1.7 All ICs have two years after successful completion of the GIC within which to undertake their IC placements. If a candidate is already an EPALS / NLS / ATLS / APLS / ATNC IC, they should complete their teaching practice(s) within two years of either their EPALS provider course or appropriate Instructor course, whichever is the most recent. Where there are exceptional circumstances that prevent this, the IC should complete the [Lapsed Instructor form](#) and email to [EPALS@resus.org.uk](mailto:EPALS@resus.org.uk)
- 9.1.8 If the provider Course Director and faculty recommend unanimously after the first teaching practice that a second assessment is unnecessary, full Instructor status will be approved by the RC (UK) on receipt of the Course Director's report.
- 9.1.9 The IC must attend the entire EPALS provider course and must lead a skill station and simulation station and be involved in an assessment station. They must not lead a session unsupervised. They may give a lecture but this is optional and should not be included as part of their formal assessment. If the IC gives a lecture, feedback should be given using the 'lecture evaluation form and matrix'. It is strongly recommended that the IC attends all lectures.
- 9.1.10 The IC assessment forms must be completed for the skill station and simulation station by EPALS Instructors nominated by the Course Director. These assessments must be discussed with the IC and a copy of the forms forwarded with the course returns.

- 9.1.11 In exceptional circumstances, it may be possible for the IC to complete one teaching practice on a European Resuscitation Council EPALS provider course. ICs wishing to do this must contact the RC (UK) before making any arrangements.
- 9.1.12 If the faculty decide that a third teaching practice is required, this must be documented on the Course Director's report and discussed with the EPALS course Co-ordinator. The decision to offer a third IC will only be granted in exceptional circumstances.
- 9.1.13 If the Instructor candidate does not pass the final teaching practice, the centre must feedback to the candidate and document fully on the IC assessment forms, logbook and Course Director's report. The Course Director must refer the Instructor candidate to the Resuscitation Council (UK) to advise further.
- 9.1.14 On successful completion of their IC teaching practices and review of the course paperwork, the IC's LMS account will be updated to reflect their Instructor status. All Instructors will be given RC (UK) Associate Membership valid whilst their instructorship is current.

## 9.2 *Named centres*

- 9.2.1 Only a GIC faculty may direct an IC to teach on course(s) at named centres. This decision cannot be revoked by the teaching practice centre.
- 9.2.2 The Instructor Candidate may be allocated one or two named centres which will usually be centres where members of the GIC faculty will be teaching and able to offer extra support for the IC.
- 9.2.3 The GIC and Instructor progress log must be referred to for confirmation of these details.
- 9.2.4 If an IC has been given one or two named centres the faculty on the first course is not permitted to allow the Instructor Candidate to become a full Instructor after only one teaching practice.

## 10 **Post-course organisation**

- 10.1 The 'Final faculty' list must be completed on the LMS **within one week** of the course date.
- 10.2 The Course Director must complete the Course Director's report on the LMS **within one week** of the course date.
- 10.3 The candidates' results must be uploaded to the LMS **within one week** of the course date. Delays in providing certificates to candidates should be minimised.
- 10.4 The Course Centre must submit to the RC (UK) as soon as possible, and **within one week** after the course, all of the following:
- programme (including full details of Instructor and IC allocations for assessment stations)

- Instructor Candidate forms
  - IP appraisal forms for all those recommended with the appropriate professional registration number
  - post-course MCQ answer sheets.
- 10.5 It is the responsibility of the original Course Centre to enter any re-test results on the LMS and release the candidates' certificate.
- 10.6 After the course, candidates must complete their course evaluation form on the LMS. Their course certificate will be released once this has been completed. The Course Centre will be able to access and export anonymised analysis to keep for reference. If a candidate has not completed their evaluation after 120 days their course certificate will be automatically released.
- 10.7 If the final faculty, course requirements and administration do not comply with the criteria set down in these regulations and no reasonable explanation is given, future course registrations and Course Centre status will be reviewed
- 10.8 The Course Centre should retain copies of all the paperwork. The duration of long-term storage of course records is a local decision. As a guide the RC (UK) retains course paperwork for a period of five years.
- 10.9 Instructors are strongly encouraged to download and review candidate feedback from the course as part of their PDR.