Background and eligibility summary

Successful election to RCP fellowship requires eligible candidates to have demonstrated the values expected of a fellow. The application process is through nomination (now called proposal) by an existing fellow, or by self-proposal supported by a sponsor. A college tutor (UK) and/or senior local colleague nominated by the candidate, must also endorse this shared application as a key step in the election process.

Successful candidates need to demonstrate that they are doing more than standard contractual obligations in the pursuit of supporting clinical excellence; that is to say, they will be going over and above what is expected for someone in their role.

Fellows of the RCP are established clinicians within their health systems and will usually have been in substantive employment for several years. Typically, this is expected to be at least 12 years from primary medical qualification and/or 8 years from MRCP(UK), but this will vary depending on factors including candidates’ choice of specialty and work patterns.

Fellows will be clinical leaders within their teams and will demonstrate excellence in a range of professional domains. Examples of criteria for these domains are set out in the Supporting information guidance, but the list is not comprehensive and is for purposes of illustration.

Candidates must:
- be licensed to practise
- be participating in annual appraisal and revalidation
- make a declaration of their good standing declaration of interests and of good standing link
- voluntarily declare any formal investigations or disciplinary action by their employer or professional regulator, along with any outcomes. If investigations are ongoing, we would recommend delaying proposal until their conclusion.

Key differences from the historical fellowship process

- Eligibility for FRCP is not dependent on length of time served.
- The process is no longer done without candidates’ knowledge.
- The criteria against which proposals are graded are more explicitly defined.
- The grading (scoring) process is completely anonymised.
- More recognition and weighting are given to those training by alternative routes to independent practice, in different countries/healthcare systems and in less-than-full-time roles, ensuring that the process is equitable and increasing transparency.

What has not changed

- Fellowship remains a reward of excellence and an accolade awarded by peers.
- RCP Council remains the final arbiter of election.
- The process is held and overseen by the office of the registrar, with the registrar accountable to RCP Council for its good governance.

The proposal process

Any eligible candidate can either be proposed or self-propose through the RCP website during the three annual fellowship cycles. A call for proposals will be made through email, the RCP website and social media channels, with cycles taking up to 4 months to complete from start to finish. Those proposals missing the cycle cut-off will be transferred across to the next cycle. The process is shared between a sponsor (usually a fellow) and the candidate, and candidates will need to contribute to the early stages of the proposal.
The proposal process for fellowship can be initiated by:

1. current fellows who wish to propose an eligible physician colleague
2. eligible physicians who can self-propose with the support of a sponsor (usually a fellow or senior colleague) for their proposal.

Existing members of the RCP, or those expressing interest in membership through our annual census, will be invited to consider self-proposal when they reach the indicative timeframes discussed above.

The same information will be required from candidate and sponsor, regardless of the route of entry into the process, and all grading will be anonymised in the interests of fairness and equality. Grading will be performed by established fellowship panels made up of a diverse group of RCP representatives, all of whom are fellows of the RCP.

**Step 1**
**Proposal webform**
Proposal webforms are accessible through the fellowship portal and can be completed by either the candidate or a proposing fellow. The form contains basic eligibility and contact information, which initiates the process of fellowship proposal.

Candidates who are self-proposing will be asked for details of a sponsor. This should be a senior clinical colleague who knows the candidate professionally and can confirm and support the detail in the candidate’s statement. They are the equivalent of the sponsoring fellow (proposer/nominator) if the candidate has been proposed.

Separately, a clinical/medical director, appraiser or another local senior colleague in the candidate’s organisation, will be asked to validate the good standing of the candidate (see Step 4). This is known as endorsement and is a validation step, confirming the veracity of the facts of the proposal as they refer to the candidate’s employment status. For UK candidates, local endorsement will also be supported by RCP college tutors, where available.

**Step 2**
**Supporting information domains**
There are two domains that demonstrate a candidate’s professional activities:

1. Scope of professional practice
2. One chosen area of special interest/expertise

These two domains will be completed by either the candidate or the sponsoring fellow, jointly or independently. Examples of activities which indicate that candidates are given in the [Supporting information guidance](#) document. This short guidance should be reviewed before completing the form. It has been designed to give candidates the best chance of success.

Information should be concise, with entries limited to 250 words per domain. Bullet points or similar CV-style formats are encouraged.

**Step 3**
**Additional information**
Once the form is complete, the initiating candidate or proposing sponsor will submit it and will receive an acknowledgment from the RCP.

**Step 4**
**Local endorsement**
The proposal will be forwarded automatically for local validation. This is independent of the candidate and sponsor. Local endorsers will be asked to confirm the accuracy of the information provided to the best of their knowledge. In rare circumstances where there are significant clinical concerns or investigations not declared, this is an opportunity for them to be highlighted.

Endorsement of the application will be sought at this stage from:

> the senior colleague named locally to validate the standing of the candidate. They should be independent of the proposer/sponsor of the candidate
> for UK applications, the RCP college tutor will also be asked to endorse the candidate’s application if they are known to them.
Step 5
Anonymised scoring
The submitted proposals will be anonymised and distributed to panels made up of current RCP regional representatives, fellows and committee members for grading.

15–20 proposals will be allocated to a panel and graded by all panel members using a simple scoring matrix. A minimum of 60% of the panel members will need to score the proposal for the average of the mean score to be calculated. This is part of the procedure’s quality assurance. The expectation is that most eligible candidates will achieve the required score. Borderline candidates and candidates not achieving the required score will be reviewed by the panel chair to ensure that the process is fair and consistent, and discussed at a virtual meeting of all panel chairs (second-stage quality assurance).

Step 6
RCP Council approval
Scoring panels will have a nominated chair, who is usually drawn from RCP regional advisers or other recognised RCP appointees. Following the meeting of panel chairs, they will make recommendations to RCP Council for election. These will be reviewed by the registrar and deputy registrar, and presented to Council for final ratification. Council has the right to increase or decrease the number of cycles per year or to make the process continuous as it sees fit.

Step 7
Offer of fellowship: the Green List
RCP byelaws state that the list of elected fellows, approved by Council, will be made available to the wider RCP fellowship to review for a short period before candidates are invited to accept an offer of fellowship.

This is known as the Green List. The Green List will be circulated digitally for a maximum of 2 weeks. If no objections are received, fellowship offers will then be made to successful candidates. Once a candidate has been offered fellowship, this offer will be valid until the end of the next fellowship cycle in 4 months’ time.

Unsuccessful candidates and their sponsors will receive feedback from the administrative team. Exceptionally, if candidates or sponsors require more direct feedback, this can be provided through the office of the registrar on request. Those candidates and their sponsors who feel that due process has not been followed may appeal directly to the registrar, who will have discretionary power to review and request a further anonymised regrading by a minimum of six fellows.