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| **NAME**  ST year: ST placement during next year:  Form R: Y/ N Declarations: Y/N Time out of training: GMC survey receipt: | |
| LEVEL 1 SIGN OFF: YES/NO | MUST have ALL competences; FULL MRCPCH exams and suitable for middle grade ST1: 1-2 written exams desirable ST2: 2 written exams essential ST3: all exams |

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| **REVIEW OF TRAINING YEAR** | **Concerns identified? Any competences NOT achieved? Comments by panel:** | |
| **Previous ARCP(S)**  Date:  Outcome:  CCT date: |  | |
| **Educational supervision**: 2 face to face meetings and 1 phone call per year | | |
| Initial meeting and **PERSONAL DEVELOPMENT PLAN** (PDP) |  | |
| Mid-term (progress) |  | |
| End of term (progress) |  | |
| **Educational Supervisor Trainer’s Report - ESSENTIAL** | APLS date: NLS date: Safeguarding level 2: | |
| **CLINICAL SUPERVISION**  **Minimum 3 meetings/post** | **Post 1 Placement:**  From to  FT/ LTFT %: No of completed months: | **Post 2 Placement:**  From to  FT/ LTFT %: No of completed months: |
| Initial meeting and **PERSONAL DEVELOPMENT PLAN** (PDP) |  |  |
| Mid-term (progress) |  |  |
| End of term (progress) |  |  |
| **CS Trainer’s reports**  **Post 1 ESSENTIAL** |  |  |

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| **EPORTFOLIO REVIEW:**  **PERSONAL DEVT PLAN:** | **Post 1** | | **Post 2** |
| **Clinical: personal**  **Clinical: from SLEs**  **Clinical governance:**  **Continuing education/ exams:**  **Teaching:**  **Research/ academic:**  **Management/ Leadership:**  **EVIDENCE OF ACHIEVEMENT** |  | |  |
| **DEVELOPMENT LOG - EVIDENCE OF DEVLOPING CLINICAL/PROFESSIONAL KNOWLEDGE AND SKILLS** | | **EVIDENCE OF ACHIEVEMENT** | |
| **EDUCATION MEETINGS/ CONTINUING PROFESSIONAL DEVELOPMENT:**  **Fundamental knowledge base, focused reflection on key learning** and educational value of session. (e.g., department teaching, grand round, conferences) | |  | |
| **CLINICS:**  Two learning points noted/clinic attended  (except PICU & NICU) | |  | |
| **SAFEGUARDING: Recognition of safeguarding issues**. Clinical assessments (may be supervised), reflection on management of cases directly involved in appropriate to level, **multidisciplinary working** | |  | |
| **CLINICAL QUESTIONS**: Demonstrate knowledge of principles of critical appraisal and research methods using a systematic approach. (e.g.,: PICO review, present at journal club) | |  | |
| **REFLECTIVE EVENTS/ CRITICAL INCIDENTS:** Wanting to improve/ learn clinical and professional skills from events. Reflection on exception reports | |  | |
| **TEACHING: Evidence of teaching**  Reflect on feedback. (Upload feedback to personal library) | |  | |
| **CLINICAL GOVERNANCE/ QUALITY IMPROVEMENT**  **Complete an audit project/ year**. Contribute to an audit cycle.  (Attend audit meetings, contribute to critical incident reporting, risk management, M&M reviews and clinical guidelines.) | |  | |
| **PRESENTATIONS/ PUBLICATIONS/ RESEARCH:** Reflect on learning from this experience | |  | |
| **LEADERSHIP/ MANAGEMENT: Working in a multi-professional team.**  Management styles used and learning from experience. | |  | |
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| **SUPERVISED LEARNING EVENTS:** At least one of each essential SLE assessed by a consultant or senior SASG/specialty doctor.  Demonstrate evidence of reflection. List learning points in PDP and demonstrate evidence of achieving this - provide links. | |
| **CEXs: Clinical examination and assessment skills, application of these skills in clinical practice** | |
| **CbDs: Application of knowledge and skills to managing patients** | |
| **Safeguarding CbD 1/ training year** | |
| **HAT (CEX) 1 per level** | |
| ACAT (CEX/CbD) optional | |
| LEADER (CbD) optional | |
| DOC optional | |
| **DOPS/ ASSESSMENTS OF PROGRESS PER TRAINING LEVEL.** | |
| **DOPS – A minimum of 1 satisfactory AoP for the compulsory procedures to be completed in level 1 training (Essential DOPS listed)** | |
| Bag/mask ventilation  Peripheral venous cannulation  Lumbar puncture  Tracheal intubation (new born infants)  Umbilical venous cannulation | **Comments: DOPS and Skills log**  **RCPCH Prescribing tool** suggested for ST1&2 |
| **MSF – 1/ calendar year (not training year) unless OOPE/C/R**  At least one MSF in neonates in ST1-3 |  |
|  |  |
| Date: Recommended outcome: CCT date: Reviewed by: | |
| **REASONS:** | **RECOMMENDATIONS AND FEEDBACK:** |