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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 3 SIGN OFF: YES/NO | MUST have all RCPCH level 3 competencies |
| CSAC/Grid progress report: |  |

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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 / ARNI date: Safeguarding level 3: | |
| **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 report**  **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:**  Reflect on applying learning to clinical care. Critique educational value of events (dept teaching, grand round, conferences) | |  | |
| **CLINICS:** Demonstrate analysis of clinical findings at a mature level. Target investigations according to likely differential diagnoses. Co-ordinate the care of complex patients. | |  | |
| **SAFEGUARDING**: Form professional opinions on a wide spectrum of patients – physical abuse, neglect, emotional abuse, etc. Reflection of management of cases. Write reports. Participate in strategy meetings. Contribute to legal proceedings. | |  | |
| **CLINICAL QUESTIONS**: Appraise scientific literature and apply to clinical practice. (Examples: PICO reviews with examples of application to your clinical practice.) | |  | |
| **REFLECTIVE EVENTS/ CRITICAL INCIDENTS:** Refine clinical and professional skills from reflection on events. Include reflection on exception reports. Awareness of the impact on the team and provision of support to the MDT. | |  | |
| **TEACHING:** Provide peer support. Demonstrate evidence of planning/ organising teaching to deliver learning objectives. Teaching junior doctors and other professionals. Reflection on feedback on teaching. (Upload feedback to personal library.) | |  | |
| **CLINICAL GOVERNANCE/ QUALITY IMPROVEMENT**  Supervise an audit/ QI project. Write a clinical guideline. Participate in risk management: incident reporting or reviewing critical incidents or participation in M&M reviews. Reflect on the implications of clinical governance for clinical care. (Attend audit/ governance meetings. | |  | |
| **PRESENTATIONS/ PUBLICATIONS/ RESEARCH:** Reflect on learning from this experience | |  | |
| **LEADERSHIP/ MANAGEMENT:** Lead an MDT. (Contribute to a committee (may be for a defined project). Chair a meeting: discharge planning/ strategy meeting/ any multi-disciplinary or other committee. | |  | |
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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: Assessment of complex patients relevant to sub-specialty/SPIN.** | |
| **CbDs: Analysis of clinical findings to derive appropriate differential diagnosis and management plans.** | |
| **Safeguarding CbD 1/ training year** | |
| HAT optional: Highlights important clinical issues and risks. Able to summarise cases succinctly. | |
| ACAT optional: Evidence of planning and prioritising tasks appropriately. | |
| **LEADER 1 per year: Understanding of clinical systems within the NHS.** | |
| **DOC 5 per level: (Examples: Clinic and referral letters, discharge summaries, medical notes, medical reports)** | |
| **DOPS/ ASSESSMENTS OF PROGRESS PER TRAINING LEVEL.** | |
| **DOPS and Skills log** | |
| **START Feedback: ST7** | |
| **MSF – 1/ calendar year (not training year) unless OOPE/C/R** |  |
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| Date: Recommended outcome: CCT date: Reviewed by: | |
| **REASONS:** | **RECOMMENDATIONS AND FEEDBACK:** |