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| **Aims and Standards for Level 1 Training: ACQUIRING KNOWLEDGE BASE** |
| **ARCP folder (Documents) Mandatory evidence** |
|  Form R Declarations Concerns Y / N Reflections TOOT …… days GMC survey receipt Curriculum vitae CCT calculator ARCP tool  |

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| **Previous ARCP** date……………..…….Outcome……… CCT date ……………. | Any concerns? Have the objectives set been met? |

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| **SUPERVISION MEETINGS & REPORTS: number of meetings per 6 month clinical placement/ calendar year same for FT and LTFT doctors** |
|  | **CLINICAL SUPERVISION (3 meetings/6 months calendar placement)** | **EDUCATIONAL SUPERVISION (3 times/year)** One meeting may be via audio/ video phone |
| **CS Trainer’s report** | *CSTR post 2 in previous year if completed after previous ARCP* |
|  | **Post 1 WTE months………………………...****Location………………………………………….** | **Post 2 WTE months…………………..……..****Location……………………………………………** | *Long term career goals:* |
| **Initial meeting and PDP** | Essential | Essential | Essential |
| **Mid-point review** | Essential | Essential | Essential |
| **End of** **Term** | Essential |  | Essential |
| **Trainer’s report** | Essential |  | Essential |

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| **ASSESSMENTS: Any concerns? Concerns addressed? Note ST doctor’s response and completion of learning objectives.****Must complete SLEs in all these: respiratory, gastroenteritis, convulsions, fever, rash, abdominal pain during level 1.** At least one of each mandatory SLE assessed must be by consultant or senior SSAG/ speciality doctor. Demonstrate learning through reflection, develop SMART PDPs, and complete objectives – this is essential for MSF and mandatory SLEs. |
| **\*MSF 1/per calendar year (not training year) unless OOP. Must complete a separate MSF in general paediatrics and neonatal placements.** |
| **MRCPCH EXAMINATIONS:**  **Foundation of Practice**  **Theory & Science**  **Applied Knowledge in Practice**  **MRCPCH Clinical examination****ST1: 1-2 written exams desirable, ST2: 2 written exams essential, ST3: Full MRCPCH exam essential** |
| **ACAT** *Demonstrate ability to assess risk and prioritise tasks when managing clinical workload in acute settings over a period of time – day shift* |
| **CBDs: minimum 1, suggest 4** *Demonstrate reasoning, decision making and application of knowledge to patient care* |
| **DOCS** *Letters – referral/ clinical/ discharge, medical reports, medical notes – demonstrate ability to document pertinent information accurately* |
| **DOPS:** *(Demonstrate competency )* **mandatory**  **bag & mask ventilation,**  **tracheal intubation of newborn infants,**   **peripheral venous cannulation,**  **umbilical venous cannulation,**  **lumbar puncture,)** |
| **HAT: mandatory 1/level** *Demonstrate appreciation of patient safety, risk and ability to prioritise relevant clinical issues* |
| **LEADER** *Apply to a clinical case or clinical problem – how could the management of this situation be improved?* |
| **Mini-CEX: minimum 1, suggest 4** *Demonstrate good clinical care* |
| **Safeguarding CBD: mandatory 1/training year** *Demonstrate knowledge of recognition and response as per level 2 safeguarding training* |
| **Standards: ACQUIRING KNOWLEDGE BASE****Eportfolio: Set learning objectives regularly through the year. Attend educational events in all GPCs during each level.** |
| **Must demonstrate progress in all the clinical GPCs below in each training year via Assessments and evidence in Dev log** |
| **RCPCH (GPCs)** | **PDP** | **CPD** | **Development and skills log** *(Examples in italics)* | **Assessments**  |
| **Values & behaviours***Reflection* |  |  | ***Reflection on MSF essential****Demonstrate self-care and team-working* | *Mini-CEX, MSF* |
| **Communication***Presentations, teaching feedback* |  |  | *Deliver oral presentations* | *Mini-CEX/DOC MSF* |
| **Clinical Procedures***Skills log* |  |  | *Demonstrate competency in skills* | *DOPS, MSF (Mini-CEX)*  |
| **Patient Management***Clinics, case notes, clinical questions* |  |  | *Ability to make a diagnosis and plan management* | *CBD/ Mini-CEX MSF, CSTR* |
| **Health Promotion Illness Prevention***Teach, reflect, governance*  |  |  | *Clinical encounters and other professional activities: (health education, teaching life support skills, patient information leaflets)* | *CBD* |
| **Safeguarding***Safeguarding* |  |  | *Participate in or observe safeguarding assessments, reflect on safeguarding cases* | *Safeguarding CBD* |
| **Patient safety & safe prescribing***Governance, reflection* |  |  | *Risk management, incident reporting, attend clinical governance, audit, morbidity and mortality meetings* | *CBD/ Mini-CEX* |
| **Upload certificates in Skills log and Certified courses for mandatory courses: APLS NLS/ARNI Safeguarding level 2**  |
| **Must demonstrate progress in at least 1 of the GPCs below in each training year and all 4 within level 1****You must evidence this via Assessments and entries in your Development log** |
| **RCPCH (GPCs)** | **PDP** | **CPD** | **Development and skills log *(Examples in italics)*** | **Assessments**  |
| **Quality Improvement***Governance, management* |  |  | *Contribute to a QI project* | *Governance section - CSTR* |
| **Leadership & team-working***Leadership & management* |  |  | *Contribution to multi-disciplinary team* | *LEADER* |
| **Education & Training***Teaching* |  |  | *Participate in teaching peers and medical students*  | *Mini-CEX* |
| **Research***Research* |  |  | *Clinical questions: critical appraisal and form opinion on clinical bottom line, attend journal club*  | *CBD* |
| **Also demonstrate your achievements is these professional activities** |
| **Presentations** *(essential in each training year)* | *Include feedback and evidence of improving skills* |  |
| **Publications** *(desirable in each training level)* |  |  |

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| **ARCP outcome…...****Date…………..………****Reviewer****……………………..….****CCT date………..….** | **Feedback** | **SMART objectives - list GPCs for next year** |