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| **Standards for Level 1 Training: ACQUIRE KNOWLEDGE BASE** |
| **ARCP folder (Documents) Mandatory evidence**  **Form R**  Declarations, Concerns N/ Y: Reflections TOOT …… days **GMC survey receipt,** **Curriculum vitae,** **Completed CCT calculator** |
| **End of ST1: 1-2 Written exams desirable**  Foundation of Practice Theory & Science Applied Knowledge in Practice  **End of ST2: 2 Written exams essential**  Foundation of Practice Theory & Science Applied Knowledge in Practice  **End of ST3: Full MRCPCH exam essential**  MRCPCH Clinical examination |

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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: same number of meetings for FT and LTFT doctors, also applies if doctor remains in same post.** | | | |
|  | **CLINICAL SUPERVISION (3 meetings/6 months calendar placement)** | | **EDUCATIONAL SUPERVISION**  (3 meetings/year are essential,  mid-point review may be via telephone) |
|  | **Post 1 WTE months………………………...**  **Location………………………………………….** | **Post 2 WTE months…………………..……..**  **Location……………………………………………** |
| **Induction meeting** | Essential, may add goals to PDP | Essential, may add goals to PDP | **Induction meeting and PDP:** Essential |
| **Mid-point review** | Recommended | Recommended | Essential |
| **Trainer’s report**  **End of**  **Post review** | CS Trainer’s report essential | CS Trainer’s report essential  (Mid-point review will be noted if end of post review meeting not yet done.) | ES Trainer’s report essential |

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| **ASSESSMENTS & MSF**: Reflect on feedback. Demonstrate progress via developing SMART PDPs/goals, and achieving objectives.  At least one of each mandatory WPBA **must** be by consultant or senior SSAG/ speciality doctor. **Tag RCPCH domains and level.**  **Must complete WPBAs in these condtions during level 1: respiratory, gastroenteritis, convulsions, fever, rash, abdominal pain** | | | | |
| **MANDATORY ASSSEMENTS:**  **\*MSF 1/per calendar year (not training year) unless OOP. Must complete a separate MSF in general paediatrics and neonatal placements.**  **HAT: mandatory 1/level** *Demonstrate ability communicate relevant clinical issues*  **Safeguarding CBD: mandatory 1/training year** *Demonstrate knowledge of recognition and response as per level 2 safeguarding training*  **DOPS:** *(Demonstrate competency to perform without supervision )* **mandatory by end of ST3:**  **bag & mask ventilation**  **tracheal intubation of newborn infants**   **peripheral venous cannulation**  **umbilical venous cannulation**  **lumbar puncture** | | | | |
| **CBDs: minimum 1, suggest 4** *Demonstrate reasoning, decision making and application of knowledge to patient care*  **Mini-CEX: minimum 1, suggest 4** *Demonstrate good clinical care*  **DOCS** *Letters – referral/ clinic/ discharge, medical reports, medical notes – demonstrate ability to document relevant information accurately*  **ACAT** *Demonstrate ability to assess risk and prioritise tasks when managing clinical workload in acute settings over a period of time – day shift*  **LEADER** *Apply to a clinical case or clinical problem – how could leadership improve the management of this situation?* | | | | |
| **Standards for Level 1: ACQUIRE KNOWLEDGE BASE - REVIEW OF RCPCH DOMAINS - Development Log and PDP/ Goals**  Set and review learning objectives regularly through the year. Attend educational events in all GPCs during each level.  Present evidence via Assessments and entries in Development and Skills Log. Tag RCPCH domains and level. | | | | |
| **Mandatory courses (Skills log & Certified courses):**  APLS NLS/ARNI Safeguarding level 2 (by end level 1) | | | | |
| **Must demonstrate progress in all the clinical GPCs below in each training year via Assessments and evidence in Dev log** | | | | |
| **GPCs:** *Entries in Dev log* | **PDP** | **CPD** | **Development and skills log** *(Illustrations)* | **Assessments** |
| **Values & behaviours**  *Reflection* |  |  | *Demonstrate GMC Good Medical Practice, knowledge of law: consent, confidentiality & death* | *Mini-CEX, MSF* |
| **Communication**  *Presentations, teaching feedback, reflection* |  |  | *Effective and professional verbal and written communication with MDT and CYP* | *Mini-CEX/DOC MSF* |
| **Clinical Procedures**  *Skills log* |  | *APLS, NLS* | *Demonstrate competency in skills* | *DOPS, MSF Mini-CEX* |
| **Patient Management**  *Clinics, case notes, clinical questions, reflection* |  |  | *Able to make a diagnosis and plan management, recognises life-threatening situations & seek help* | *CBD/ Mini-CEX MSF, CSTR* |
| **Health Promotion & Illness Prevention**  *Teach, reflect, governance* |  |  | *Knowledge of influencing factors and strategies to address health- surveillance, education* | *CBD* |
| **Safeguarding**  *Safeguarding, reflection* |  | *Level 2 training* | *Participate in or observe safeguarding assessments, reflect on safeguarding cases. Demonstrate knowledge of recognition and appropriate response* | *Safeguarding CBD, DOC* |
| **Patient safety &**  **Safe prescribing**  *Governance, reflection* |  | *On-line learning course* | *Understand risk management, incident reporting. Attend clinical governance, audit, morbidity and mortality APLS, NLS* | *CBD/ Mini-CEX* |
| **Must demonstrate progress in at least one of the GPCs below in each training year and all four within level 1** | | | | |
| **RCPCH (GPCs)** | **PDP** | **CPD** | **Development and skills log *(Examples in italics)*** | **Assessments** |
| **Quality Improvement**  *Governance, management* |  |  | *Contribute to a QI project/ audit/ guideline* | *Governance section - CSTR* |
| **Leadership & team-working**  *Leadership/ management* |  |  | *Appreciate and effective contribute to multi-disciplinary team working* | *LEADER, MSF* |
| **Education & Training**  *Teaching, include feedback* |  |  | *Participate in teaching peers and medical students* | *Mini-CEX, MSF* |
| **Research**  *Research, clinical question Journal club feedback* |  | *GCP training* | *Complete critical appraisal and form opinion on clinical bottom line, able to present opinion to patients and at journal club* | *CBD* |
| **Additional observations:** | | | | |
| **ST3 – ready to progress to middle grade level?** | | | | |
| **Exceptional achievements:** note in feedback in ARCP form | | | | |

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| **ARCP outcome…...**  **Date…………..………**  **Reviewer**  **……………………...….**  **Revised CCT date ………….…..………….** | **Feedback** (Record on ARCP form)  **Recommend and record SMART objectives for next year:** focus on goals required to complete level |