

17.1 Guidance for ST doctors on Maintaining your E-portfolio

Maintaining an up to date e-portfolio is essential to your meeting the requirements of the Paediatric Training Programme delivered by Health Education England Yorkshire and the Humber. You should **“tag” all your evidence** of learning and gaining competences to the learning outcomes of the RCPCH curriculum. This will demonstrate your achievement of the key capabilities in all the RCPCH domains.

A detailed review of your e-portfolio is undertaken at your ARCP with the aim to triangulate evidence from three essential sources detailed below. The ARCP panel will consider your progress in acquiring professional knowledge and skills, and your professional behaviours and attitudes to form an opinion on your progress in training.

Use this guidance alongside the ARCP e-portfolio review tools for your training level on the HEE Y&H website

1. Supervision meeting records and reports – formative and summative assessments

Clinical supervision:

Your supervisor will help you to set short term goals for each clinical placement and, provide clinical supervision and guidance. You must meet with your clinical supervisor at the (i) beginning of your clinical placement to set a personal development plan, (ii) midway through your 6 month placement to review your progress and objectives, and (iii) at the end of every 6 month (calendar) placement to confirm that you have met your objectives and record if there are any incomplete objectives.

Your clinical supervisor must complete a **trainer’s report** at the end of each 6 (calendar) month placement. This is essential for all placements that are completed before your ARCP date. The information in this report is based on their direct observation of you, and feedback from the multi-disciplinary team.

As the “routine” ARCP round takes place in June (6 to 8 weeks before the end of your placement) you are not expected to have a completed clinical supervisor’s trainer’s report for your current placement during the routine ARCP round. You must have a record of your **mid-term clinical supervisor’s meeting** that provides a review of your progress.

Educational supervision:

Your supervisor will help you plan your long term career goals as you progress through training. You must meet with your educational supervisor regularly (3 times/ calendar year) - use the same model as above but focus on your long-term goals. Aim to generate SMART (Specific, Measurable, Achievable, Realistic and Time-bound) objectives to develop your clinical and professional knowledge and skills in all the RCPCH curriculum domains.

Your educational supervisor must complete a **trainer's report** before each ARCP (the single exception is when an interim ARCP is held for the sole purpose of reviewing MRCPCH examination results). The information in this report is based on their communication with your clinical supervisor and a detailed review of the evidence presented in your e-portfolio.

In case your educational supervisor is also your clinical supervisor, the meetings may be combined. Both clinical and educational supervisor's trainer's reports must be completed. You supervisor may choose to embed your clinical supervisor's trainer's report as a separate section in the educational supervisor's trainer's report.

2. Assessments - summative and formative

- a) Multisource feedback
- b) Supervised learning events throughout the year – your assessor's comments on your level of skills and learning points you need to develop
- c) START (ST7) feedback
- d) MRCPCH examinations

You must respond to your assessments by writing your learning points. How will they influence your practice? What learning objectives have you and your assessor identified? Generate a SMART PDP and demonstrate completion of the goals.

Mandatory assessments as per the RCPCH are highlighted in the ARCP e-portfolio review tool. At least one of each mandatory SLEs must be assessed by a consultant or SASG/ speciality doctor. 25% SLEs may be in simulated situations. Mandatory DOPS must be in real life situations.

3. Your demonstration of your development of professionals knowledge and skills

You must demonstrate progression in all Generic Professional Capabilities (GPCs) by the end of each training level.

You must demonstrate progress in all the clinical GPCs in every training year:

- *Professional values and behaviour*
- *Professional skills and knowledge – communication*
- *Professional skills and knowledge - clinical procedures*
- *Professional skills and knowledge - patient management*
- *Safeguarding*
- *Health promotion and illness prevention*
- *Patient safety*

You must demonstrate progress in at least one or more of the GPCs not relating to direct clinical care in each training year in level 1, and at least 2 or more GPCs in level 2 and 3

- *Leadership and team working*
- *Quality improvement*
- *Education and training*
- *Research*

Personal development plan:

You must record your **personal development plan** (PDP) at the beginning of each 6 month placement. This should be in a SMART format.

You should **review this regularly** throughout your training year, and set **further learning objectives** as they become evident from your assessments, reflections on your experiences, START feedback (ST7 & 8) and ARCP feedback.

Demonstrate completion of each of your objectives through:

- a) Your **responses to feedback from SLEs: develop a PDP and sign it off** when completed
- b) Demonstration of progression or maintenance of technical skills in your **skill log**
- c) Demonstration of continuing learning in your **development and skills log** (see appendix B)

STANDARDS expected at each level of training

You may choose to demonstrate skills expected at a more senior level of training

1. **Level 1:** Acquiring a knowledge base
2. **Level 2:** Applying knowledge to clinical practice and demonstrating autonomy
3. **Level 3:** Developing professional expertise, analysing and evaluating knowledge, and teaching and developing others

Other mandatory evidence

1. Form R: fill relevant sections, sign it; write reflective notes on declarations (reference date)
2. GMC survey receipt
3. Up to date curriculum vitae – highlight achievements in the training year reviewed at ARCP
4. Evidence of completing mandatory training – APLS, NLS/ARNI and safeguarding
5. Completed CCT calculator
6. Completed ARCP review tool – enter the dates and section of the development log for each entry that demonstrates your learning in each domain of the RCPCH curriculum

17.2 Guidance on Maintaining and Assessing the Skills and Development Log in E-portfolio

Skills log: Develop increasing level of skills in procedures toward expert practice with ability to teach.

Certificates: Upload Certificates for APLS, NLS/ARNI and Safeguarding training.

Clinics/Case reflection: Evidence of developing skills in clinical management and in outpatient consultations, record your management of follow-up of out-patients and in-patients: reviewing and acting on investigation results and communicating this to the patient and their parents/carers.

Safeguarding: Evidence of developing skills in assessing patients, forming opinions, and writing reports in a variety of situations, e.g., physical/ emotional abuse, neglect. Document your learning from your contribution to multi-disciplinary working and strategy meetings. Reflect learning gained from attendance at child death overview panel and court if you have these opportunities. ST1-3 doctors – reflect on what you have learnt from cases you may have seen but not assessed formally.

Clinical questions: Demonstrate your ability to perform a critical appraisal of scientific literature. The PICO (population, intervention, comparison, outcome) is a useful format to structure your answer to a clinical question. Apply a tool that you may have used in Journal Club to discuss the strengths and weaknesses of the study you appraise and your opinion of the clinical bottom line. What have you gained from reviewing this paper – will it/ how will it alter your practice?

Certified Course/Education and Meetings: Demonstrate assimilation of learning, and how you apply this to your professional practice. Critique the educational value of the session attended.

Reflection: Demonstrate willingness and ability to learn from events and apply learning points to professional practice. Ability to respond to other members of the team, patients and their parents/carers in a professional manner, and provide advocacy for the patient.

Teaching: Contribute to teaching and training: planning and delivering teaching. Reflect on feedback and use this to improve skills. ST4-8 doctors – evidence of providing formative feedback to junior colleagues through completing SLEs. Develop training packages/ training days to deliver RCPCH curriculum/ provide health education to patients and their parents/carers.

Research: Lead/ complete/ contribute to a research project. If not undertaking own research project complete GCP and may recruit subjects to clinical trials if opportunity arises.

Presentations: Aim to present at scientific meetings/ conferences. You may include presentation to your department, Trust or at regional, national or international meetings

Publications: Aim for publications in peer reviewed journals.

Clinical Governance:

Risk management: Incident reporting and grading, ST4-8 doctors – perform root cause analysis.

Clinical audit: Complete clinical audit project/s, present findings and make recommendations. ST4-8 doctors may design audits and supervise junior colleagues, also demonstrate contribution to carrying out recommendations following clinical audit project.

Guidelines: Write evidence based clinical guidelines/ patient care pathways.

Mortality and morbidity reviews: Contribute to learning from case reviews to improve individual practice and improve systems of care.

Management: Demonstrate initiative and ability to finish projects, skills to work well within an MDT, keep to deadlines and deliver the end product to a high standard – this may be a quality improvement project. Other examples are contributing to or chairing committees for clinical work, education (e.g., training days), training, research or clinical services (e.g., clinical rota).

Leadership: Demonstrate ability to lead a team in the above situations described in management.

Miscellaneous: Use this section to provide any additional information.

17.3 Template for Curriculum vitae

Name:

Qualifications (with dates):

ST year of training:

CCT date:

Clinical skills and experience, clinical procedures

Also note experience of safeguarding, and health promotion and illness prevention

Continuing professional development - education meetings attended

Summary of achievements (state your role within each activity and give dates):

Patient safety

Clinical Governance

Quality Improvement

Education and Training

Leadership and Management

Research

Publications

Presentations

