# Health Education South West – School of Primary Care

## ARCP Checklist for GP Trainees (updated December 2017)

Colour code:

 = needs to be completed for all ARCPs

 = only required for final ST3 ARCP

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| **Form R** | Y/N |  |
| Have you uploaded a new Form R? |  | A new version of the Form R was released in Spring 2017. Please ensure that this version is used as the old version is no longer accepted by Revalidation: <http://www.severndeanery.nhs.uk/about-us/revalidation/show/documents-and-guidance>  |
| Have you completed the Time Out of Training (TOOT) section of the Form R? |  | This section is very important for calculating any necessary changes to CCT dates. Please complete it carefully. You need to include all days of TOOT, not just working days. If you have not taken any TOOT, we still need a ‘0’ in every box, especially the total box. For longer periods of TOOT, this website can be useful for working out the number of days: [www.timeanddate.com](http://www.timeanddate.com)  |
| **Work place based assessments** | Y/N |  |
| Have the correct number of COTs/CBDs etc been done? |  | See [www.rcgp.org.uk/gp-training-and-exams/mrcgp-workplace-based-assessment-wpba.aspx](http://www.rcgp.org.uk/gp-training-and-exams/mrcgp-workplace-based-assessment-wpba.aspx) regarding the requirements |
| Have the MSFs enough respondents? |  | 5 for each MSF in ST1 and 10 for each MSF in ST3 |
| Have the MSFs and PSQ been released by the supervisor and commented on? |  | Unless the MSF/PSQ are released, they cannot be seen by the panel and will not be counted as evidence |
| Is there a CSR for each clinical attachment? |  | This includes each 4 month attachment and is required by the ARCP panel |
| Clinical Examination and Procedural skills (CEPs) |  | A reminder that to fulfil GMC requirements for satisfactory completion of training, the final ARCP panel for ST3s will require to see evidence that trainees are competent in all intimate examinations (female breast, male and female genital, rectal and prostate). Trainees should therefore document in their final CEPS self-rating the location of evidence for each of these areas so that their supervisor can verify it. Evidence may include old DOPS assessments, CEPs forms, mini-Cex, COTs, CSR, Learning Log entries. Note that Log entries alone cannot provide sole evidence of competence, as there needs to be objective verification by a suitably qualified observer see: <http://www.rcgp.org.uk/training-exams/mrcgp-workplace-based-assessment-wpba/ceps-tool-for-mrcgp-workplace-based-assessment.aspx> |
| **Learning Log/Naturally Occurring Evidence** | Y/N |  |
| Are there the recommended numbers of entries? |  | For the deanery recommendations see: <http://www.primarycare.severndeanery.nhs.uk/training/gp-curriculum-and-mrcgp/wpba/learning-log-recommendations-naturally-occurring-evidence/>  |
| Have all the entries been shared? |  | If not, then they cannot be viewed by your supervisor or the ARCP panel |
| Is learning demonstrated from clinical encounters? |  | The important sections are: what did I learn and what will I do differently? |
| Have log entries been linked to curriculum headings? |  | This is necessary to demonstrate curriculum coverage |
| Has your supervisor linked entries to competencies? |  | If not, then ask your ES (or CS if in GP practice) to do this before the review |
| Have you completed SEAs on any complaints or exam failures? |  |  |
| Is there demonstrable learning from SEAs? |  | Only SEAs that have involved patient deaths or near misses, or where there has been a formal investigation, need to be entered on the Form R.There is an expectation that SEAs in the ST3 year will be discussed at practice SEA meetings as a team-based exercise, and that the outcome of that discussion will be detailed within the learning log. |
| Is there evidence of engagement in an audit/Quality Improvement Activity (QIA) suggesting improvement to personal/practice performance |  | There is an expectation that all trainees will be involved in quality improvement work and will participate in and write up a Quality Improvement Project (QIP) by the end of the ST3 year. The QIP should be based on work **within primary care**.A QIP requires the analysis, evaluation and discussion of data and may or may not incorporate a traditional audit.Evidence must be present by the final ARCP. |
| **Personal Development Plan** | Y/N |  |
| Has the PDP been updated since the last ESR? |  | Learning objectives should be set after each ESR |
| Have ESR generated objectives been edited to be SMART (specific, measurable, achievable, realistic and time-bound)? |  | If your ES has sent objectives to the PDP from the last ESR, they need to have been made SMART (best to do this straight after the ESR meeting) |
| Have a reasonable number of learning objectives been achieved? |  | This may be dependent on the most recent attachment |
| **Out of Hours Work** | Y/N |  |
| Have all the supervisor forms been uploaded to your eportfolio? |  | These need to be signed and scanned [OOH Session Log Sheet](http://www.primarycare.severndeanery.nhs.uk/assets/Primary-Care/Info-for-Trainees/OOH-Session-Log-Sheet.doc) |
| Has the OOH cumulative Record sheet been completed and uploaded to the learning log OOH section? |  | This is a new requirement as from 2015 and can be obtained here: [3 OOHs-record-spreadsheet-for-eportfolio V2.xlsx](file:///%5C%5Cxswsha.nhs.uk%5Cdata%5CSevern%20Institute%5CData%5CGENERAL%20PRACTICE%5CAssessment%5CARCP%5CHelp%20guides%20and%20info%5CARCP%5C3%20OOHs-record-spreadsheet-for-eportfolio%20V2.xlsx)  |
| **Requirements for the ESR before your FINAL ARCP** | Y/N |  |
| Have the CPR/AED certificates been uploaded and the box ticked? |  | Upload under “courses/certificates” |
| Is there evidence of engagement in audit/QIA during training? |  | See learning log section, evidence is required in order to finish training |
| Is there coverage of all curriculum headings? |  | There should be demonstrable learning in all areas during training |
| Is there evidence of Level 3 training and reflection for Child Safeguarding? Are there 2 x safeguarding reflective log entries completed in ST3, of which at least one is related to a child? |  | See learning log section, evidence is required in order to finish training. The Level 3 learning can be done at any stage in training, but there should have been reflection on a safeguarding activity during the ST3 year.  |
| Have you identified learning needs for the 12 months after finishing training? |  | These should be entered in the “actions before next review” section in the self-rating section |
| **Complete self-rating of Training progress** | Y/N |  |
| Have you tagged and referred to up to three pieces of evidence per competency? |  | For more info, see: [www.primarycare.severndeanery.nhs.uk/training/gp-curriculum-and-mrcgp/wpba/how-to-assess-curriculum-competencies/](http://www.primarycare.severndeanery.nhs.uk/training/gp-curriculum-and-mrcgp/wpba/how-to-assess-curriculum-competencies/) |
| Have you identified SMART “actions before next review” for each competency area? |  |  |