**ARCP: Evidence Checklist and GPStR Feedback Sheet:** *(for use by the panel member who reviews the ePF)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of GP StR:** |  | **Training Year:** | ST1/ST2/ST3 | **Chair of ARCP Panel:** |  |
| **Educational Supervisor:** |  | **Full Time/LTFT 50% or 60%** |  | **ARCP Panel Date:** |  |
| **Period of Training being reviewed:** |  | **CCT/End of Training Date:** |  | **Date of last ARCP Panel:**  **Outcome:** |  |

Proportion of this review under:

-Old WPBA schedule/ New WPBA schedule:

https://www.rcgp.org.uk/training-exams/training/mrcgp-workplace-based-assessment-wpba/transition-arrangements.aspx

-COVID regulations/ non COVID regulations:

https://www.rcgp.org.uk/-/media/Files/GP-training-and-exams/MRCGP/arcp-guidance-faqs-from-5-august-2020-rcgp.ashx?la=en

1. Reviewer – please complete electronically and e-mail to GPSTP Coordinator before the date of the ARCP Panel
2. Coordinator – update with any revisions from the panel
3. E-mail form to GPStR to upload to ePortfolio log entry ‘Professional Conversation’: registrar will write reflection on this feedback
4. If GPStR referred to Deanery, complete ‘Reasons for Referral to Deanery ARCP Panel’ box and e-mail form to locality administrator.

|  | **Acceptable** | **Unclear or Not**  **acceptable** | **N/A** | **Comments** |
| --- | --- | --- | --- | --- |
| **Previous ARCP outcome**  (were there any additional comments or actions recommended by the last panel?)  1st ARCP ACTF trainees: ACRP from previous specialty |  |  |  |  |
| **Educators’ notes** |  |  |  |  |
| **Requirements** | | | | |
| **CBD/ CAT**  *old schedule: 6 per WTE ST1/2, 12 per WTE ST3*  *new schedule: 4 per WTE ST1/2, 5 per WTE ST3*  *nil for COVID period Feb- July 2020* |  |  |  |  |
| **audio COT/COT/MiniCEX**  *old schedule: 6 per WTE ST1/2, 12 per WTE ST3*  *new schedule: 4 per WTE ST1/2, 7 per WTE ST3*  *nil for COVID period Feb- July 2020* |  |  |  |  |
| **MSF**  *old schedule: ST1/2 2 cycles, ST2- not required*  *new schedule: ST1/2 1 (10x responses), ST3 2*  *nil for COVID period Feb- July 2020 but compensatory evidence for WWC&T ie educator's note, LLE or CSR* |  |  |  |  |
| **PSQ**  *old schedule: ST1/2: one in 1st GP post, ST3 1*  *new schedule: one in ST3*  *nil for COVID period Feb- July 2020* |  |  |  |  |
| **Placement Planning Meeting**  *old schedule: none*  *new schedule: 1 per post* |  |  |  |  |
| **QIP**  *old schedule: one in training (or audit/ QoF reflection)*  *new schedule: one in ST1/2 GP post*  *nil for COVID period Feb- July 2020* |  |  |  |  |
| **QIA**  *old schedule: nil mandated*  *new schedule: All trainees must demonstrate involvement in Quality Improvement at least once a year*  *nil for COVID period Feb- July 2020* |  |  |  |  |
| **Significant Event**  *old schedule: reflection on any revalidation concern*  *new schedule: only completed if reaches GMC threshold of potential or actual serious harm to patient* |  |  |  |  |
| **Learning Event Activity**  *old schedule: one by end of training (logged as SEA)*  *new schedule: one per ST year*  *nil for COVID period Feb- July 2020* |  |  |  |  |
| **Prescribing Review**  *old schedule: mandatory pilot full time ST3 starting Aug 2019*  *new schedule: one in ST3*  *n/a for COVID period Feb- July 2020* |  |  |  |  |
| **Leadership**  *old schedule: not required*  *new schedule: one in ST3*  *n/a for COVID period Feb- July 2020* |  |  |  |  |
| **Clinical Case Reviews**  Good enough spread of good enough quality entries over time, with evidence of reflection and development,)  *old schedule: no mandated number*  *new schedule: 36 per WTE ST year*  *COVID period Feb- July 2020: compensatory evidence if unable to provide WPBA evidence* |  |  |  |  |
| **Capability progression**  from ESR 1/2 & spread  (if end of ST3 all competent or excellent) |  |  |  |  |
| **Action Plans** |  |  |  |  |
| **Clinical Experience Groups Spread** |  |  |  |  |
| **mandatory CEPS**   * Rectal * Prostate * Breast * Female Genital * Male Genital   *old schedule: 5 satisfactory intimate CEPS by end ST3*  *new schedule: 5 satisfactory intimate CEPS by end ST3 plus a range of others*  *COVID period Feb- July 2020: ST3 finishers in this period could use educator's note/ ESR evidence of capability as alternative* |  |  |  |  |
| **PDP** |  |  |  |  |
| [**Revalidation statements**](http://www.yorksandhumberdeanery.nhs.uk/postgraduate_medical_and_dental_education/revalidation/)   1. CSR 2. ESR 3. Enhanced form R (in learning log) |  |  |  | Is there consistency between these? Are there known unresolved concerns identified in any of these 3 sources? (If there are concerns, this will be discussed at panel so you do not need to go into great detail here)  No  Yes |
| TOOT (from form R) |  |  |  |  |
| **HEYH suggested requirements:** | | | | |
| Reflection on key learning points from each post |  |  |  |  |
| Case Study or Presentation (2 advised per year) |  |  |  |  |
| Attendance record at HDR/ modular courses  *minimum 16 sessions per 6 months FTE but not required for satisfactory ARCP.*  *Reflection on education sessions required* |  |  |  |  |
| **Completion of GMC survey**  *not required in COVID period* |  |  |  |  |
| **CSA** |  |  |  |  |
| **AKT** |  |  |  |  |
| **Compliance Passport** | | | | |
| **Form R** |  |  |  |  |
| **CPR/BLS/AED or ALS** |  |  |  |  |
| **Child and adult safeguarding**  **i) in date L3 adult and child certificate**  **ii) knowledge update in current ST year**  **iii) evidence of applying learning** |  |  |  |  |
| **The Post (any issues for GPSTP)** |  |  |  |  |
| **The Person (personal Problems/Probity)** |  |  |  |  |
| **Overall** |  |  |  |  |

|  |
| --- |
| **ePortfolio Highlights** |
|  |
| **Suggestions for Future Improvement** |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Educational supervisor feedback** | | | |
| RCGP is encouraging ARCP panels to give ES feedback. It would be very helpful if panel reviewer completes this section so panel chair can provide ES feedback. | | | |
|  | **Areas for consideration** | **Satisfactory ESR** | **Excellent ESR** |
|  |  |  |  |
| **Please highlight any areas that apply or add free text to box below** | * Trainee in ST1 or ST2 rated CFL (trainees need to demonstrate competence over course of the training programme before they can be CFL; NFD-AE is appropriate in ST1 and ST2 for good trainees). * Trainee at end of 3 year’s training or in ST3 extension rated NFD-ME or NFD-AE in any of the capabilities (trainees supposed to be CFL or E at this stage; if not should be rated NFD-BE). * Ratings not evidence based; can happen where supervisor knows trainee is a good doctor (or not) and bases the ratings on knowledge of the doctor rather than the ePF evidence. * Panel came to a different conclusion about the trainee’s progress for reasons in free text box below or see ARCP outcome form. * Other reasons; please add free text comments below. | * A thorough evidence based ESR was completed which helped the panel and the panel agreed with the ES ratings. * Other reasons; please add free text comments below | Please add free text comments below |
| **Please add free text comments here;-** | | | |

|  |
| --- |
| **Reasons for Referral to Deanery ARCP Panel (if applicable)** |
|  |