

A guide from your TPDs

# How to prepare for ARCP



**E**very 12 months you will need an Annual Review of Competence Progression (ARCP). This is an essential part of your training, you cannot progress to the next stage without it.

This guide aims to highlight some **common** errors we often see and how to avoid them. It is not an exhaustive guide.

Trainees who are working LTFT or who are out-of-sync must submit their evidence on a pro-rata basis for their annual ARCPs. For example, an ST1 DiT working 60% LTFT must submit 60% of the total evidence required for his/her ST1 training year ahead of their annual ARCP.

This guide is specifically written for Swindon trainees and references how to achieve competencies within this patch.

# Annual Requirements

The requirements for each ARCP are clearly detailed on the deanery website via the above link. It is your responsibility to make sure that your portfolio is complete before your ARCP date. The below table gives a summary of the mandatory learning logs, WBPAs and surveys that you must complete during each phase of training:

WPBA / log entry	ST1	ST2	ST3	Total
Clinical Case Reviews	36	36	36	108
LEA / SEA	1	1	1	3
Leadership	0	0	1	1
QIA	1 (if project is in ST2)	1 (if project was in ST1)	1	2
Prescribing (reflection)	0	0	1 (after assessment)	1
Placement Planning Meeting	1 per post	1 per post	1 per post	1 per post
CbDs / CATs	4	4	5	13
CSR	1 per post	1 per post	1 per post	1 per post
Prescribing Assessment	0	0	1	1
COT / AudioCOT / Mini-CEX	4	4	7	15
QIP	1 (in ST1 or ST2 GP placement)		0	1
CEPS	5 mandatory CEPS signed off as competent to perform unsupervised plus many others - must have at least 3 per year			
PSQ	0	0	1	1
MSF	1 (with 10 responses)	1 (with 10 responses)	2 (1 MSF, 1 Leadership MSF)	4
UUSC	<b>See below</b>			
BLS				
Safeguarding				
PDP				

# Safeguarding

- **All** trainees in **ST1** must complete level 3 adult and child safeguarding courses **at the start of the year**. This is normally an online course, for example via ELfH. Certificates must be uploaded to the e-portfolio.
- Every trainee must then complete a safeguarding update for both adults and children each year thereafter. We will host a safeguarding session as part of our normal Wednesday teaching, if you attend this session this will be sufficient.
- **Every year** you must also add a learning log reflective entry for a child **and** an adult safeguarding case. Be sure to **include the word safeguarding in the title** of these learning logs - if we can't find them at panel you risk not fulfilling these mandatory criteria.

# BLS

- All trainees must participate in an **in-person** Cardiopulmonary Resuscitation (CPR) and Automated External Defibrillation (AED) course.
- Online courses will **not** be accepted! It is very important you do not leave this requirement to the last minute.
- If you are working in a role that involves paediatric patients this should cover both adults and children
- If you are exclusively working in rotations with adult patients only that year then your BLS course can be limited only to adults.
- If you are working at the GWH then you can organise a BLS training session via the resuscitation team.
- If you are working in general practice then please discuss with your practice about participating in their annual BLS update - **do this early** so you don't inadvertently book leave on the same day.
- If you are unable to attend a course at your practice then it is your responsibility to find an alternative course.
- You still need to do this if you have a valid ALS certificate

## OOH/UUSC

- All UUSC work (including OOH shifts) should be documented onto the UUSC passport, which should then be uploaded to the portfolio by attaching it to a Supporting Documentation/CPD log entry (be sure to title the entry clearly)
- All OOH sessions should also be documented on an UUSC log sheet
- All UUSC evidence should be linked to the Urgent and unscheduled care clinical experience group
- You **must** do some OOH in **all GP rotations** - duty doctor shifts in your practice alone are not sufficient.

## PDP

- At each ESR you should review previous PDP goals and set **at least two** new ones
- This **includes** the final ESR/ARCP - this PDP will then be used as part of your first appraisal
- It's important that these PDP are SMART - see the above link for RCGP guidance on this

## QIP/QIA

- You must complete one QIP during training. We **strongly** recommend you do this in ST1 or ST2 (during a GP rotation).
- If not completed by the end of ST2 you will need to do it in ST3 - this can be challenging given how much there is to do in the ST3 year.
- In years you have not done a QIP you will need to do a QIA.

## Form R

- A new form R must be uploaded for each ARCP
- Complete both parts of the form and sign electronically and upload it onto the compliance passport in your portfolio
- You should do this **no earlier** than five weeks before your ARCP date

## Clinical Case Review

- The number of clinical case reviews needed for each year depends on your LTFT status - if you are full time you will need 36 each year
- If you are on extension you will need a pro-rata number of CCRs depending on the length of your extension - for example 6 months at 100% would need 18 CCRs as a minimum
- It is **vital** that these are based on a **personal** encounter with a patient and that they are **reflective** - we do check during ARCP and if there is no evidence of reflection you will be required to upload additional CCRs.

## ESR

- An ESR is needed every six months, regardless of LTFT status.
- At least one ESR in a 12 month period must be a 'full' ESR
- The other ESR may be an 'interim ESR' as long as certain criteria are met - see the above link for details
- The last ESR once a trainee is ready for CCT should be marked as a 'final' ESR.

## CEPS

You should complete at least 3 CEPS per year - these can be mandatory CEPS or additional CEPS

By the end of ST3 you must have CEPs for the five mandatory intimate examinations

In future years the additional CEPs may become mandatory so they are well worth completing if you have an opportunity