



Royal College of Anaesthetists

National Anaesthetic ARCP Checklist Covid-19 FOR CT1 & CT2 Anaesthetics and ACCS CT3

**** Please note - this guidance is only applicable for ARCPs conducted for the 2020 academic year****

ESSR This must be completed on the Lifelong Learning platform (LLP) with all the necessary evidence
 Must be commented on and signed off by Educational Supervisor (ES)
 Must be commented on and signed off by College Tutor (CT)

ESSR Navigation Section	Evidence Required
Overview	<p>Dates should be the start and end of the period under review for the ARCP. Start date is the day following the end date set for the previous ARCP</p> <p>It is good practice to upload an updated CV each year. It is strongly recommended that a CV is included for an end of year ST6 ARCP</p>
Placements in programme	Hospital placement or placements since last ARCP
Examinations	<p>Completion date should be entered Exam pass confirmatory letter should be uploaded as evidence of pass If you have not been able to take an exam due to Covid-19 then please detail this in the learner's comment section of the ESSR. Please also comment if you have passed part(s) of the exam or if you have sat but are currently waiting for results. If you have been unsuccessful in the written part of Primary or Final please make it clear on your ESSR that you have sat the exam.</p>
Milestones	<p>This section should automatically populate with evidence if certificates are completed on the LLP. If certificates are completed on paper then these must be uploaded as documents</p>
Personal Development Plan (PDP)	<p>The purpose of a PDP is to set out learning objectives for the year of training. If these are included in the supervisor's meeting record then there is no requirement to do an additional PDP but it will be necessary to indicate where this evidence is. New objectives can be added to the PDP as they occur through the year</p>
Logbook	<p>The preferred format for recording cases is the LLP logbook. If the LLP logbook is not used then the RCoA approved dataset must be used to present:</p> <ol style="list-style-type: none"> 1. A logbook of cases since the last ARCP 2. A cumulative logbook of cases from the start of core training

Supervisory meeting	<p>Evidence of a minimum of three meetings per year. This could be:</p> <ul style="list-style-type: none"> Supervisor meetings completed on LLP ESSR completed at end of placement An uploaded document such as the School's own supervisor Meeting form <p>If you could not complete all meetings with your supervisor because of Covid-19 then please detail this in the learner's comment section of the ESSR</p>	
Review unit progress	<p>CUT forms completed between the ESSR start and end date should appear here.</p>	
	<p>Minimum required units for stages of training:</p> <ol style="list-style-type: none"> 1. CT1 (Anaes) Introduction to anaesthesia 8 units. IAC 2. CT2 (ACCS) Introduction to anaesthesia 8 units. IAC and ICM <p>If you have not completed your IAC due to Covid-19 then please detail this in the learner's comments section of the ESSR</p> <ol style="list-style-type: none"> 3. CT2 (Anaes) CT3 (ACCS) All core units. IACOA <p>If you have not completed all core units or your IACOA due to Covid-19 then please detail this in the learner's comments section of the ESSR</p>	
Workplace based assessments	<p>WPBAs completed during the ESSR start and end date should appear here</p>	
Multisource feedback (MSF)	<p>One MSF is acceptable for this year with a minimum of 8 responses. If you have been unable to get an MSF due to Covid-19 then your ES or College Tutor will need to make a comment about your progress. Please detail this in the learner's comments section of the ESSR</p>	
Consultant source feedback	<p>Summary of consultant feedback to be provided by College Tutor</p>	
Non-clinical activities	<p>Evidence here supports the requirements of Annexes A and G. There must be some evidence entered in each domain for each ARCP. Evidence of involvement with an audit or quality improvement project is essential. This can include involvement with national or regional projects for example NAP or SNAP studies.</p> <p>If you have not been able to complete a quality improvement project due to Covid-19 then evidence of some involvement will be acceptable such as a data collection sheet for an on-going project or a proposal document for a planned project</p> <p>Continuing significant involvement such as a leading role with a longer-term project may count depending on the project. Compliance with mandatory training is a Trust and national requirement but it is not a requirement for ARCP evidence.</p> <p>If you have been unable to gain evidence for these categories due to Covid-19 then please detail this in the learner's comments section of the ESSR</p>	
	Non clinical category	Examples of evidence to include
	Academic and research	<ul style="list-style-type: none"> Research methodology courses Publications Presentations Data collection for national studies Good Clinical Practice certificate Research meeting attendance Journal club attendance Prizes

	Improvement science, safe and reliable systems	Evidence of involvement in an audit or quality improvement (QI) project (see above) Attendance at departmental QI meetings e.g. audit, M&M, MDTs Presentation of QI project Simulation training Publications
	Teaching and learning	Teaching activity Simulation training Feedback on teaching delivered Teaching and education courses such as Anaesthetists as Educators, Generic Instructors Course. Attendance record for local teaching Courses and conferences attended Literature reviews Presentations Life support courses: No courses are mandated but it is recommended that resuscitation skills are kept up to date
	Management	Management courses Leadership courses Guideline and policy writing Rota organisation Representative roles on local, regional or national committees Course organisation Management role in QI project Simulation training
Absences	This should include sick leave, parental leave, compassionate leave and leave for military duties if applicable	
Form R (Eng, Wales, NI) or SOAR (Scotland) Revalidation document	This document should be uploaded to the LLP This should cover all work done Any involvement with a Serious Incident must be recorded on this document. It must also be discussed with an educational supervisor and	
Details of any concern	If there have been no concerns or investigations put NONE If there have been concerns or investigations ensure that details go on Form R/SOAR and put THESE HAVE BEEN RECORDED ON FORM R/SOAR	
Comments	Learners comments should be completed reflecting on progress since the last ARCP and aspirations for the coming year You must add here any detail about elements of training missed or incomplete due to Covid-19	
Reflective practice	The RCoA position on reflection is: Reflection can be done on positive as well as negative events. It is equally important to learn from excellence, as it is from errors. Some Schools of Anaesthesia have extra requirements for a defined number of reflections to be included in trainee portfolios. Neither the College nor the GMC specify a fixed number of reflections, in order to progress in training. We ask these Schools to consider the necessity	

	<p>their extra ARCP requirements, to be sensitive to the concerns of trainees, and to guide them in achieving the necessary standard.</p> <p>In keeping with the AoMRC/CoPMED statement on reflection, we recommend that documentation of reflective practice focuses on understanding of what has been learnt, and any resultant action, rather than on factual accounts of events.</p> <p>Useful and valid reflection may be undertaken verbally with a supervisor. It is recommended that the supervisor should document that discussion with reflection on an event has taken place, and that the trainee has demonstrated insightful learning. The demonstration of capability to reflect is the key point that should be recorded.</p> <p>There is no requirement for a set number of reflections There must be evidence of reflection as written in the Educational Supervisor's comment.</p> <p>Written reflections can be linked to clinical and non-clinical activities as personal reflections but it is not mandatory for any specific reflections to be recorded.</p>
ACCS CT3 ONLY	Common competencies sheet 100% complete uploaded to LLP