

# Stage 1 ARCP Checklists

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V2.0

West Midlands Schools of Anaesthesia  
DECEMBER 2025

## Year 1 ARCP Requirements for ACCS CT2s Only

ESSR Section	How the National Checklist applies to ACCS CT2 (incorporating <a href="#">ACCS ARCP requirement guide</a> )															
<b>Overview</b>	<p>Start and finish dates of period under review entered <input type="checkbox"/></p> <p>Start date is the day after “period covered to” from previous ARCP outcome form <input type="checkbox"/></p>															
<b>Placements in programme</b>	Correct hospital placements since last ARCP <input type="checkbox"/>															
<b>Exams</b>	None mandatory															
<b>Milestones</b>	IAC certificate present in milestones section, with simulation evidence (critical incidents & failed intubation), EPA1&2, and MTR linked <input type="checkbox"/>															
<b>PDP</b>	<p>PDP present in PDP section <input type="checkbox"/></p> <p><i>OR</i></p> <p>PDP present as part of <del>Educational Meeting</del> (record this fact in learner comments) <input type="checkbox"/></p>															
<b>Logbook</b>	<p>Logbook present <input type="checkbox"/></p> <p>ES Comment on logbook numbers, casemix &amp; supervision <input type="checkbox"/></p>															
<b>Supervisory meetings</b>	3 or more supervisory meetings <input type="checkbox"/>															
<b>Learning progress</b>	HALO for EPA1 complete, with at least one SLE at supervision level 2b <input type="checkbox"/>															
	HALO for EPA2 complete, with evidence in all four key capability clusters below, and at least one SLE at supervision level 2b: <input type="checkbox"/>															
	<table border="1"> <thead> <tr> <th>Key Capability Cluster</th> <th>Evidence?</th> <th>Highest Supervision level achieved</th> </tr> </thead> <tbody> <tr> <td>Preoperative preparation</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Intra-operative care</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Postoperative care</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Emergencies and simulation including:           <ul style="list-style-type: none"> <li>Simulation 1 (critical incidents from “unknowns” section of AAGBI Quick Reference Handbook)</li> <li>Simulation 2 (failed intubation)</li> </ul> </td> <td><input type="checkbox"/></td> <td></td> </tr> </tbody> </table>	Key Capability Cluster	Evidence?	Highest Supervision level achieved	Preoperative preparation	<input type="checkbox"/>		Intra-operative care	<input type="checkbox"/>		Postoperative care	<input type="checkbox"/>		Emergencies and simulation including: <ul style="list-style-type: none"> <li>Simulation 1 (critical incidents from “unknowns” section of AAGBI Quick Reference Handbook)</li> <li>Simulation 2 (failed intubation)</li> </ul>	<input type="checkbox"/>	
Key Capability Cluster	Evidence?	Highest Supervision level achieved														
Preoperative preparation	<input type="checkbox"/>															
Intra-operative care	<input type="checkbox"/>															
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Emergencies and simulation including: <ul style="list-style-type: none"> <li>Simulation 1 (critical incidents from “unknowns” section of AAGBI Quick Reference Handbook)</li> <li>Simulation 2 (failed intubation)</li> </ul>	<input type="checkbox"/>															

ESSR Section	How the National Checklist applies to ACCS CT2 (incorporating ACCS ARCP requirement guide)
<b>Learning progress (continued)</b>	<p>ACCS Sedation Assessment Tool (ASAT) complete to entrustment level 2a <input type="checkbox"/></p> <p>ICM HALO complete <input type="checkbox"/></p> <ul style="list-style-type: none"> <li>At least one piece of supporting evidence (SLE, personal activity, personal reflection) linked to all key capability (KC) clusters within HALO (A-K) <input type="checkbox"/></li> <li><b>Most</b> KC clusters within HALO have an SLE at the required supervision level <input type="checkbox"/></li> </ul>
<b>SLEs</b>	<p>Evidence (SLEs/personal activities) to support entrustment levels for ACCS Procedural Skills (LO5)*:</p> <ul style="list-style-type: none"> <li>Pleural aspiration of air or fluid [<i>DOPS OR simulation with reflection</i>]: 2a <input type="checkbox"/></li> <li>Chest drain (Seldinger technique) [<i>DOPS OR simulation with reflection</i>]: 2a <input type="checkbox"/></li> <li>Chest drain (open technique) [<i>DOPS OR simulation with reflection</i>]: 1 <input type="checkbox"/></li> <li>Establish invasive monitoring (central venous pressure and arterial line) [<i>DOPS OR simulation with reflection</i>]: 2a for both <input type="checkbox"/></li> <li>Vascular access in emergency (intraosseous infusion and femoral vein) [<i>DOPS OR simulation with reflection</i>]: 1 for either <input type="checkbox"/></li> <li>Fracture/dislocation manipulation [<i>DOPS</i>]: 1 <input type="checkbox"/></li> <li>External pacing [<i>DOPS OR simulation with reflection</i>]: 2a <input type="checkbox"/></li> <li>Direct current cardioversion) [<i>DOPS OR simulation with reflection</i>]: 2a <input type="checkbox"/></li> <li>Point of care ultrasound-guided vascular access and FIB) [<i>DOPS OR simulation with reflection</i>]: 2a both <input type="checkbox"/></li> <li>Lumbar puncture) [<i>DOPS OR simulation with reflection</i>]: 2a <input type="checkbox"/></li> <li>Procedural sedation [ASAT]: <input type="checkbox"/></li> </ul> <p><i>*NB Warwick ACCS Clinical Skills course is a suitable alternative to "simulation with reflection" for any clinical skills listed on the course CPD certificate</i></p> <p>Progress with Stage 1 capabilities ie evidence (SLEs, personal activities, personal reflections) across <b>a number</b> of domains both GPC and clinical (<b>NB stage 1 domains/HALOs overlap with ACCS LOs and evidence can be linked to both</b>) <input type="checkbox"/></p> <p>ES comment on SLEs present <input type="checkbox"/></p>
<b>MSF</b>	Minimum 1 x MSF (12+ responses, both medical and non-medical) covering the whole year (including both anaesthesia and ICM): <input type="checkbox"/> [but separate MSF for Anaesthesia and ICM preferred]
<b>MTRs</b>	<p>1 x MTR to support IAC [use "Multiple Trainer Report" tab on LLP] <input type="checkbox"/></p> <p>1 x MCR/MTR in ICM [use "ACCS MCR/MTR" tab on LLP] <input type="checkbox"/></p> <p>ES comment on MTRs <input type="checkbox"/></p>

ESSR Section	How the National Checklist applies to ACCS CT2 (incorporating ACCS ARCP requirement guide)
<i>ACCS Reports (Please save as "Personal Activity")</i>	<a href="#">ACCS Clinical Supervisors (End of Placement) Report (Word document)</a> present for <b>ICM placement</b> <input type="checkbox"/>  Correct entrustment levels on ICM clinical supervisor report: <ul style="list-style-type: none"> <li>• LO3: 2a <input type="checkbox"/></li> <li>• LO6: 2a <input type="checkbox"/></li> <li>• LO8: 2a <input type="checkbox"/></li> <li>• LO9: satisfactory comments <input type="checkbox"/></li> <li>• LO10: satisfactory comments <input type="checkbox"/></li> <li>• LO11: satisfactory comments <input type="checkbox"/></li> </ul>
	<a href="#">ACCS Clinical Supervisors (End of Placement) Report (Word document)</a> present for <b>Anaesthesia placement</b> <input type="checkbox"/>  Correct entrustment levels on Anaesthesia clinical supervisor report: <ul style="list-style-type: none"> <li>• LO3: 2a <input type="checkbox"/></li> <li>• LO6: 2a <input type="checkbox"/></li> <li>• LO7: 2b <input type="checkbox"/></li> <li>• LO9: satisfactory comments <input type="checkbox"/></li> <li>• LO10: satisfactory comments <input type="checkbox"/></li> <li>• LO11: satisfactory comments <input type="checkbox"/></li> </ul>
	<a href="#">ACCS Educational Supervisors End of Year Report</a> covering both Anaesthesia and ICM placements <input type="checkbox"/>  Correct overall ES entrustment levels on end of year report: <ul style="list-style-type: none"> <li>• LO3: 2a <input type="checkbox"/></li> <li>• LO6: 2a <input type="checkbox"/></li> <li>• LO7: 2b <input type="checkbox"/></li> <li>• LO8: 2a <input type="checkbox"/></li> <li>• LO9: satisfactory/good/excellent <input type="checkbox"/></li> <li>• LO10: satisfactory/good/excellent <input type="checkbox"/></li> <li>• LO11: satisfactory/good/excellent <input type="checkbox"/></li> <li>• Supportive comments from ES on meeting ACCS learning outcomes 1-11 <input type="checkbox"/></li> </ul>
<i>Non-clinical</i>	Evidence of some involvement in clinical governance activity, with associated reflection or A-QIPAT <input type="checkbox"/>  Evidence (SLEs/personal activities/personal reflections) across <b>a number</b> of stage 1 non-clinical domains ( <i>NB stage 1 non-clinical domains/HALOs overlap with ACCS LOs 9-11 and evidence can be linked to both</i> ) <input type="checkbox"/>
<i>Absences</i>	Absence section complete (note absences on Form R and in learner / ES comments) <input type="checkbox"/>

ESSR Section	How the National Checklist applies to ACCS CT2 (incorporating ACCS ARCP requirement guide)
<i>Form R</i>	Form R complete – no serious incidents <input type="checkbox"/> <u>OR</u> Form R complete - Serious Incidents reflected upon and discussed with ES <input type="checkbox"/>
<i>Details of any concern</i>	Section complete and supervisor comments present <input type="checkbox"/>
<i>Reflective practice</i>	Evidence of reflective practice (evidence in LLP and/or ES comment) <input type="checkbox"/>
<i>Learner comments</i>	Present <input type="checkbox"/>
<i>ES comments</i>	Present <input type="checkbox"/> Specific comment on reflective practice if no other evidence in LLP <input type="checkbox"/>
<i>College Tutor comments</i>	Present <input type="checkbox"/>

**Year 1 ARCP Requirements for Core CT1s Only (NOT ACCS)**

ESSR Section	How the National Checklist applies to <b>CORE CT1</b>																					
<b>Overview</b>	<p>Start and finish dates of period under review entered <input type="checkbox"/></p> <p>Start date is the day after “period covered to” from previous ARCP outcome form <input type="checkbox"/></p>																					
<b>Placements in programme</b>	Correct hospital placements since last ARCP <input type="checkbox"/>																					
<b>Exams</b>	None mandatory																					
<b>Milestones</b>	IAC certificate present in milestones section, with simulation evidence (critical incidents & failed intubation), EPA1&2, and MTR linked <input type="checkbox"/>																					
<b>PDP</b>	<p>PDP present in PDP section <input type="checkbox"/></p> <p><u>OR</u></p> <p>PDP present as part of Educational Meeting (record this fact in learner comments) <input type="checkbox"/></p>																					
<b>Logbook</b>	<p>Logbook present <input type="checkbox"/></p> <p>ES Comment on logbook numbers, casemix &amp; supervision <input type="checkbox"/></p>																					
<b>Supervisory meeting</b>	3 or more supervisory meetings <input type="checkbox"/>																					
<b>Learning progress</b>	<p>HALO for EPA1 complete, with at least one SLE at supervision level 2b <input type="checkbox"/></p> <p>HALO for EPA2 complete, with evidence in all four key capability clusters below, and at least one SLE at supervision level 2b: <input type="checkbox"/></p> <table border="1"> <thead> <tr> <th>Key Capability Cluster</th> <th>Evidence?</th> <th>Highest Supervision level achieved</th> </tr> </thead> <tbody> <tr> <td>Preoperative preparation</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Intra-operative care</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Postoperative care</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Emergencies and simulation including:</td> <td></td> <td></td> </tr> <tr> <td>• Simulation 1 (critical incidents from “unknowns” section of AAGBI Quick Reference Handbook)</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>• Simulation 2 (failed intubation)</td> <td><input type="checkbox"/></td> <td></td> </tr> </tbody> </table>	Key Capability Cluster	Evidence?	Highest Supervision level achieved	Preoperative preparation	<input type="checkbox"/>		Intra-operative care	<input type="checkbox"/>		Postoperative care	<input type="checkbox"/>		Emergencies and simulation including:			• Simulation 1 (critical incidents from “unknowns” section of AAGBI Quick Reference Handbook)	<input type="checkbox"/>		• Simulation 2 (failed intubation)	<input type="checkbox"/>	
Key Capability Cluster	Evidence?	Highest Supervision level achieved																				
Preoperative preparation	<input type="checkbox"/>																					
Intra-operative care	<input type="checkbox"/>																					
Postoperative care	<input type="checkbox"/>																					
Emergencies and simulation including:																						
• Simulation 1 (critical incidents from “unknowns” section of AAGBI Quick Reference Handbook)	<input type="checkbox"/>																					
• Simulation 2 (failed intubation)	<input type="checkbox"/>																					

ESSR Section	How the National Checklist applies to <b>CORE CT1</b>
<b>Learning progress (continued)</b>	<p>If 6 months ICM placement completed this year, ICM HALO complete <input type="checkbox"/></p> <ul style="list-style-type: none"> <li>At least one piece of supporting evidence (SLE, personal activity, personal reflection) linked to all key capability (KC) clusters within HALO (A-K) <input type="checkbox"/></li> <li><b>Most</b> KC clusters within HALO have an SLE at the required supervision level <input type="checkbox"/></li> </ul>
	Progress with Stage 1 capabilities ie evidence (SLEs, personal activities, personal reflections) across a number of domains both GPC and clinical <input type="checkbox"/>
	ES comment on SLEs present <input type="checkbox"/>
<b>MSF</b>	1 x MSF (12+ responses, both medical and non-medical) covering the whole year (including ICM if applicable): <input type="checkbox"/> [Separate MSF for ICM preferred if placement completed this year]
<b>MTRs</b>	1 x MTR to support IAC <input type="checkbox"/>
	1 x MTR in ICM (if ICM completed this year) <input type="checkbox"/>
	ES comment on MTRs <input type="checkbox"/>
<b>Non-clinical</b>	Evidence of some involvement in clinical governance activity, with associated reflection or A-QIPAT <input type="checkbox"/>
	Evidence (SLEs/personal activities/personal reflections) across <b>a number</b> of stage 1 non-clinical domains <input type="checkbox"/>
<b>Absences</b>	Absence section complete (note absences on Form R and in learner / ES comments) <input type="checkbox"/>
<b>Form R</b>	Form R complete – no serious incidents <input type="checkbox"/> <u>OR</u> Form R complete - Serious Incidents reflected upon and discussed with ES <input type="checkbox"/>
	Section complete and supervisor comments present <input type="checkbox"/>
<b>Reflective practice</b>	Evidence of reflective practice (LLP or ES comment) <input type="checkbox"/>
<b>Learner comments</b>	Present <input type="checkbox"/>
<b>ES comments</b>	Present <input type="checkbox"/> Specific comment on reflective practice if no other evidence in LLP <input type="checkbox"/>
<b>College Tutor comments</b>	Present <input type="checkbox"/>

## Year 2 ARCP requirements (ACCS CT3 or Core CT2)

ESSR Section	How the National Checklist applies to YEAR 2															
<b>Overview</b>	Start and finish dates of period under review entered <input type="checkbox"/> Start date is the day after “period covered to” from previous ARCP outcome form <input type="checkbox"/>															
<b>Placements in programme</b>	Correct hospital placements since last ARCP <input type="checkbox"/>															
<b>Exams</b>	None mandatory															
<b>Milestones</b>	IAC certificate present in milestones section with simulation evidence (critical incidents & failed intubation), EPA1&2, and separate standalone MTR linked <input type="checkbox"/> IACOA certificate present in milestones section with simulation evidence (obstetric anaesthesia, GA for LSCS and failed intubation), EPA3&4, and separate standalone MTR linked <input type="checkbox"/>															
<b>PDP</b>	PDP present in PDP section <input type="checkbox"/> <i>OR</i> PDP present as part of Educational Meeting (record this fact in learner comments) <input type="checkbox"/>															
<b>Logbook</b>	Logbook present <input type="checkbox"/> ES Comment on logbook numbers, casemix & supervision <input type="checkbox"/>															
<b>Supervisory meeting</b>	3 or more supervisory meetings <input type="checkbox"/> Comment in learner/ES section on where to find evidence if dates not obvious on ESSR <input type="checkbox"/>															
<b>Learning Progress</b>	HALO for EPA3 complete, with at least one SLE at supervision level 3 <input type="checkbox"/> HALO for EPA4 complete, with evidence in all key capability clusters below, and at least one SLE at supervision level 3 <input type="checkbox"/> <table border="1"> <thead> <tr> <th>Key Capability Cluster</th> <th>Evidence?</th> <th>Highest Supervision level achieved</th> </tr> </thead> <tbody> <tr> <td>Preoperative preparation</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Intra-operative care</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Postoperative care</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Emergencies and simulation including:           <ul style="list-style-type: none"> <li>Simulation 1 (obstetric anaesthesia and analgesia, incorporating common emergencies)</li> <li>Simulation 2 (GA for LSCS and failed intubation drill)</li> </ul> </td> <td><input type="checkbox"/></td> <td></td> </tr> </tbody> </table>	Key Capability Cluster	Evidence?	Highest Supervision level achieved	Preoperative preparation	<input type="checkbox"/>		Intra-operative care	<input type="checkbox"/>		Postoperative care	<input type="checkbox"/>		Emergencies and simulation including: <ul style="list-style-type: none"> <li>Simulation 1 (obstetric anaesthesia and analgesia, incorporating common emergencies)</li> <li>Simulation 2 (GA for LSCS and failed intubation drill)</li> </ul>	<input type="checkbox"/>	
Key Capability Cluster	Evidence?	Highest Supervision level achieved														
Preoperative preparation	<input type="checkbox"/>															
Intra-operative care	<input type="checkbox"/>															
Postoperative care	<input type="checkbox"/>															
Emergencies and simulation including: <ul style="list-style-type: none"> <li>Simulation 1 (obstetric anaesthesia and analgesia, incorporating common emergencies)</li> <li>Simulation 2 (GA for LSCS and failed intubation drill)</li> </ul>	<input type="checkbox"/>															
<b>SLEs</b>	At least one piece of evidence in all 14 stage 1 domains <input type="checkbox"/> ES comment on SLEs present <input type="checkbox"/>															

ESSR Section	How the National Checklist applies to YEAR 2
<b>MSF</b>	1 x MSF (12+ responses, both medical and non-medical) <input type="checkbox"/>
<b>MTRs</b>	1 x MTR to support IACOA <input type="checkbox"/>
	1 x additional MTR for whole year <input type="checkbox"/>
	ES comment on MTRs <input type="checkbox"/>
<b>Non-clinical</b>	Evidence of some involvement in clinical governance activity, with associated reflection or A-QIPAT <input type="checkbox"/>
	At least one piece of appropriate evidence (SLEs/personal activities/personal reflections) in all 7 stage 1 non-clinical domains <input type="checkbox"/>
<b>Absences</b>	Absence section complete (note absences on Form R and in leaner / ES comments) <input type="checkbox"/>
<b>Form R</b>	Form R complete – no serious incidents <input type="checkbox"/> <b>OR</b> Form R complete - Serious Incidents reflected upon and discussed with ES <input type="checkbox"/>
<b>Details of any concern</b>	Section complete and supervisor comments present <input type="checkbox"/>
<b>Reflective practice</b>	Evidence of reflective practice (LLP or ES comment) <input type="checkbox"/>
<b>Learner comments</b>	Present <input type="checkbox"/>
<b>ES comments</b>	Present <input type="checkbox"/> Specific comment on reflective practice if no other evidence in LLP <input type="checkbox"/>
<b>College Tutor comments</b>	Present <input type="checkbox"/>

### Year 3 ARCP requirements (ACCS CT4 or Core CT3)

ESSR Section	How this applies to YEAR 3
<i>Overview</i>	Start and finish dates of period under review entered <input type="checkbox"/>
	Start date is the day after “period covered to” from previous ARCP outcome form <input type="checkbox"/>
<i>Placements in programme</i>	Correct hospital placements since last ARCP <input type="checkbox"/>
<i>Exams</i>	Primary FRCA completion date present <input type="checkbox"/>
	Primary FRCA examination pass letter in document store <input type="checkbox"/>
<i>Milestones</i>	IAC certificate present in milestones section with simulation evidence (critical incidents & failed intubation), EPA1&2, and separate standalone MTR linked <input type="checkbox"/>
	IACOA certificate present in milestones section with simulation evidence (obstetric anaesthesia, GA for LSCS and failed intubation), EPA3&4, and separate standalone MTR linked <input type="checkbox"/>
<i>PDP</i>	PDP present in PDP section <input type="checkbox"/> <u>OR</u> PDP present as part of Educational Meeting (record this fact in learner comments) <input type="checkbox"/>
<i>Logbook</i>	Logbook present <input type="checkbox"/>
	ES Comment on satisfactory logbook numbers, casemix & supervision <input checked="" type="checkbox"/>
<i>Supervisory meetings</i>	3 or more supervisory meetings <input type="checkbox"/>
	Comment in learner/ES section on where to find evidence if dates not obvious on ESSR <input type="checkbox"/>

ESSR Section	How this applies to YEAR 3																				
<i>Learning progress</i>	<p>All 14 stage 1 HALOs complete and have <i>satisfactory supporting evidence as per table below</i> <input type="checkbox"/></p> <table border="1" data-bbox="729 436 1718 1262"> <thead> <tr> <th data-bbox="729 436 932 595"></th><th data-bbox="932 436 1336 595"> <b>CLINICAL HALOs</b>  <i>Perioperative medicine, General Anaesthesia, Resuscitation/Transfer, Regional, Pain, Sedation, ICM</i> </th><th data-bbox="1336 436 1718 595"> <b>NON-CLINICAL (GPC) HALOs</b>  <i>Professional behaviours/communication, Management/professional/regulatory requirements, Team Working, Safety/QI, Safeguarding, Education/Training, Research</i> </th></tr> </thead> <tbody> <tr> <td data-bbox="729 595 932 809"><b>Evidence</b></td><td data-bbox="932 595 1336 809"> At least one piece of evidence (SLE, personal activity or reflection) is mapped to all key capabilities / key capability clusters within the HALO </td><td data-bbox="1336 595 1718 809"> Evidence (SLE, personal activity, reflection) covering a <i>selection</i> of the key capabilities within the domain.   <i>Examples of appropriate forms of evidence for each HALO are given in the "Appropriate evidence for non-clinical HALOs<sup>2</sup>" table below</i> </td></tr> <tr> <td data-bbox="729 809 932 992"><b>Supervision levels</b></td><td data-bbox="932 809 1336 992"> Most (<i>ideally all</i>) key capabilities/key capability clusters are supported by an SLE (DOPS/ A-CEX/CBD) at the <b>appropriate supervision level<sup>1</sup></b> (<i>NB one SLE can be mapped to multiple KCs if relevant</i>) </td><td data-bbox="1336 809 1718 992">N/A</td></tr> <tr> <td data-bbox="729 992 932 1103"><b>MTR</b></td><td data-bbox="932 992 1336 1103"> At least one MTR is linked to each HALO, in which at least one trainer has given feedback on the HALO/domain in question </td><td data-bbox="1336 992 1718 1103"> At least one MTR is linked to each HALO, in which at least one trainer has given feedback on the HALO/domain in question. </td></tr> <tr> <td data-bbox="729 1103 932 1183"><b>Logbook</b></td><td data-bbox="932 1103 1336 1183"> There is a logbook of satisfactory cases relating to the domain/HALO in question </td><td data-bbox="1336 1103 1718 1183">N/A</td></tr> <tr> <td data-bbox="729 1183 932 1262"><b>Faculty/Trainer opinion</b></td><td data-bbox="932 1183 1336 1262"> Trainer signing the HALO (in consultation with faculty) agrees doctor can safely perform at the required level </td><td data-bbox="1336 1183 1718 1262"> Trainer signing the HALO (in consultation with faculty) agrees doctor can safely perform at the required level </td></tr> </tbody> </table>				<b>CLINICAL HALOs</b> <i>Perioperative medicine, General Anaesthesia, Resuscitation/Transfer, Regional, Pain, Sedation, ICM</i>	<b>NON-CLINICAL (GPC) HALOs</b> <i>Professional behaviours/communication, Management/professional/regulatory requirements, Team Working, Safety/QI, Safeguarding, Education/Training, Research</i>	<b>Evidence</b>	At least one piece of evidence (SLE, personal activity or reflection) is mapped to all key capabilities / key capability clusters within the HALO	Evidence (SLE, personal activity, reflection) covering a <i>selection</i> of the key capabilities within the domain.  <i>Examples of appropriate forms of evidence for each HALO are given in the "Appropriate evidence for non-clinical HALOs<sup>2</sup>" table below</i>	<b>Supervision levels</b>	Most ( <i>ideally all</i> ) key capabilities/key capability clusters are supported by an SLE (DOPS/ A-CEX/CBD) at the <b>appropriate supervision level<sup>1</sup></b> ( <i>NB one SLE can be mapped to multiple KCs if relevant</i> )	N/A	<b>MTR</b>	At least one MTR is linked to each HALO, in which at least one trainer has given feedback on the HALO/domain in question	At least one MTR is linked to each HALO, in which at least one trainer has given feedback on the HALO/domain in question.	<b>Logbook</b>	There is a logbook of satisfactory cases relating to the domain/HALO in question	N/A	<b>Faculty/Trainer opinion</b>	Trainer signing the HALO (in consultation with faculty) agrees doctor can safely perform at the required level	Trainer signing the HALO (in consultation with faculty) agrees doctor can safely perform at the required level
	<b>CLINICAL HALOs</b> <i>Perioperative medicine, General Anaesthesia, Resuscitation/Transfer, Regional, Pain, Sedation, ICM</i>	<b>NON-CLINICAL (GPC) HALOs</b> <i>Professional behaviours/communication, Management/professional/regulatory requirements, Team Working, Safety/QI, Safeguarding, Education/Training, Research</i>																			
<b>Evidence</b>	At least one piece of evidence (SLE, personal activity or reflection) is mapped to all key capabilities / key capability clusters within the HALO	Evidence (SLE, personal activity, reflection) covering a <i>selection</i> of the key capabilities within the domain.  <i>Examples of appropriate forms of evidence for each HALO are given in the "Appropriate evidence for non-clinical HALOs<sup>2</sup>" table below</i>																			
<b>Supervision levels</b>	Most ( <i>ideally all</i> ) key capabilities/key capability clusters are supported by an SLE (DOPS/ A-CEX/CBD) at the <b>appropriate supervision level<sup>1</sup></b> ( <i>NB one SLE can be mapped to multiple KCs if relevant</i> )	N/A																			
<b>MTR</b>	At least one MTR is linked to each HALO, in which at least one trainer has given feedback on the HALO/domain in question	At least one MTR is linked to each HALO, in which at least one trainer has given feedback on the HALO/domain in question.																			
<b>Logbook</b>	There is a logbook of satisfactory cases relating to the domain/HALO in question	N/A																			
<b>Faculty/Trainer opinion</b>	Trainer signing the HALO (in consultation with faculty) agrees doctor can safely perform at the required level	Trainer signing the HALO (in consultation with faculty) agrees doctor can safely perform at the required level																			

<sup>1</sup>See "Supervision levels for Clinical Key Capabilities" table below

<sup>2</sup>See "Appropriate evidence for non-clinical HALOs" table below

<sup>3</sup>See "Stage 1 Practical Procedures Checklist" below

ESSR Section	How this applies to YEAR 3
<b>Learning progress (continued)</b>	Checklist of stage 1 practical procedures <sup>3</sup> evidenced in document store: <input type="checkbox"/>
<b>MSF</b>	MSF (12+ responses, both medical and non-medical) <input type="checkbox"/>
<b>MTRs</b>	1 x MTR covering whole year <input type="checkbox"/>
	ES comment on MTRs <input type="checkbox"/>
<b>Non-clinical</b>	<p><u>During year 3:</u> Evidence of some involvement in clinical governance activity, with associated reflection or QI-PAT <input type="checkbox"/></p> <p><u>Over whole of stage 1:</u> Led at least one local QI project with reflection or A-QIPAT <input type="checkbox"/>  <u>OR</u>  <b>Significant</b> involvement with at least one National or regional project with reflection or A-QIPAT <input type="checkbox"/>  <u>OR</u>  <b>Significant</b> involvement with at least one long-term QI project with reflection or A-QIPAT <input type="checkbox"/></p>
	All stage 1 non-clinical HALOs complete <b>with appropriate forms of evidence linked to key capabilities<sup>2</sup></b> <input type="checkbox"/>
<b>Absences</b>	Absence section complete (note absences on Form R and in learner / ES comments) <input type="checkbox"/>
<b>Form R</b>	Form R complete – no serious incidents <input type="checkbox"/> <u>OR</u> Form R complete - Serious Incidents reflected upon and discussed with ES <input type="checkbox"/>
<b>Details of any concern</b>	Section complete and supervisor comments present <input type="checkbox"/>
<b>Reflective practice</b>	Evidence of reflective practice (LLP or ES comment) <input type="checkbox"/>
<b>Learner comments</b>	Present <input type="checkbox"/>
<b>ES comments</b>	Present <input type="checkbox"/>
	Specific comment on reflective practice if no other evidence in LLP <input type="checkbox"/>
<b>College Tutor comments</b>	Present <input type="checkbox"/>

<sup>1</sup>See “Supervision levels for Clinical Key Capabilities” table below

<sup>2</sup>See “Appropriate evidence for non-clinical HALOs” table below

<sup>3</sup>See “Stage 1 Practical Procedures Checklist” below

**Table: Supervision Levels for Clinical Key Capabilities (Stage 1)**

Domain	Key Capability Clusters	Supervision level expected	Evidence?	SL achieved?
<i>Perioperative Medicine &amp; Health Promotion</i>	ABCDEF	2b		
	G	Not applicable		
	H	Not applicable		
	J	2b		
	K	Not applicable		
	L	2b		
	M	2a		
	N	2b		
	O	2b		
	P	Not applicable		
<i>General Anaesthesia</i>	ABCD	2b		
	E	2b		
	FG	Not applicable		
	HIJ	2b		
	KL	2a		
	M	2a		
	N	1		
	OP	2a(5-10); 2b (>10)		
	QR	3		
	S	2a		
<i>Regional Anaesthesia</i>	ABC	3		
	D	3		
	E	2b		
	F	2b		
	GHI	3		
	J	Not applicable		
	K	Not applicable		
<i>Resuscitation and transfer</i>	ABCD	2b		
	EFG	2b		
	H	Not applicable		

Domain	Key Capability Clusters	Supervision level expected	Evidence?	SL achieved?
<i>Procedural sedation</i>	ABCDEFG	2a		
<i>Pain</i>	ABC	2b		
	DE	2b		
	F	Not applicable		
	G	3		
<i>ICM</i>	A	FICM capability level 2		
	B	FICM capability level 2		
	C	FICM capability level 2		
	D	FICM capability level 1		
	E	FICM capability level 2		
	F	FICM capability level 2		
	G	FICM capability level 2		
	H	FICM capability level 2		
	I	FICM capability level 1		
	J	FICM capability level 0		
	K	FICM capability level 1		

Domain	Key Capability Clusters	Supervision level expected	Evidence?	SL achieved?
<i>EPA1</i>	Anaesthetic preoperative assessment	2b		
<i>EPA2</i>	Preoperative preparation	2b		
	Intraoperative care	2b		
	Postoperative care	2b		
	Emergencies and simulation	2b		
	Sim 1: skills and drills	Not applicable		
	Sim 2: failed intubation drill	Not applicable		
<i>EPA3</i>	Administration of pain relief for labour	3		
<i>EPA4</i>	Preoperative preparation	3		
	Intraoperative care	3		
	Postoperative care	3		
	Emergencies and simulation	3		
	Sim 1: obs anaesthesia	Not applicable		
	Sim 2: GA for LSCS/failed intubation in obs	Not applicable		

**Table: Appropriate Evidence for Non-Clinical HALOs (Stage 1)**

<b>Types of evidence</b>			
<b>Domain/HALO</b>	<b>Experience &amp; Logbook</b>	<b>Supervised Learning Events (SLEs)</b>	<b>Personal activities, reflections, other</b>
<b>Professional behaviours and communication</b>	Range of surgical specialties and patient groups in theatre setting, obstetrics, pre-operative assessment clinics and Intensive Care Unit.	<p>effective communication skills with patients during pre-operative assessment</p> <p>accurate recording of details of pre-operative assessment on anaesthetic chart</p> <p>discussion of event where demonstration of duty of candour is appropriate</p> <p>safe and effective handover to another member of the healthcare team</p> <p>high standards in prescribing medication</p> <p>active involvement with safety checks in theatre eg. WHO checklist</p>	<p>maintenance of professional portfolio on LLP including evidence of regular meetings with educational supervisor</p> <p>completion of GMC trainee survey</p> <p>reflection on examples of good and poor behaviour by members of the multidisciplinary team</p> <p>demonstration of confidentiality within all means of communication including social media</p> <p>simulation training: critical incidents, transfers</p> <p>attendance at quality improvement/clinical governance meetings.</p> <p>Other evidence:</p> <p>multi-source feedback</p> <p>thank you cards/letters/emails from patients and colleagues.</p>
<b>Management of professional and regulatory requirements</b>	engagement with Anaesthetic Departmental activities.	<p>application of principles of information governance</p> <p>knowledge of guidance from GMC and other professional bodies.</p>	<p>equality and diversity training</p> <p>attendance at hospital induction and completion of mandatory training requirements</p> <p>attendance at departmental clinical governance meetings</p> <p>e-Learning or reading literature on employment law</p> <p>presentation at clinical governance meeting</p> <p>attendance at junior doctors' forum meetings.</p>

<b>Types of evidence</b>			
<b>Domain/HALO</b>	<b>Experience &amp; Logbook</b>	<b>Supervised Learning Events (SLEs)</b>	<b>Personal activities, reflections, other</b>
<b>Team working</b>	range of surgical specialties and patient groups in theatre setting, obstetrics, pre-operative assessment clinics and Intensive Care Unit.	evidence of good team working through reflection participation with teams in theatre (eg ALMAT) acting as a member of Medical Emergency Team management of the critically ill patient as part of the ICU team.	completion of resuscitation courses simulation training multi-source feedback.
<b>Safety &amp; quality improvement</b>	involvement in QI activities within Anaesthetics Department as a minimum requirement.	understanding of quality improvement methodology (A-QIPAT for relevant projects) engagement with surgical safety initiatives and departmental guidelines relating to patient safety learning from critical incidents learning from pre-briefs and de-briefs on own and team's performance evidence of applying good non-technical skills and effective multi-disciplinary team working (e.g. ALMAT) safe prescription and administration of drugs.	attendance at quality improvement training involvement with local, regional or national quality improvement projects submission of excellence and incident reports simulation training e.g. crisis resource management, critical incident, resuscitation attendance at local clinical governance/quality improvement meetings self-directed learning regarding duty of candour multi-source feedback.
<b>Safeguarding</b>		management of consent in an adult who does not have capacity knowledge of the local procedure for referral of an adult for safeguarding concerns involvement with cases where there are safeguarding issues with children or adults.	attendance at local mandatory training including safeguarding e-Learning: child and adult safeguarding e-Learning: mental capacity act.

<b>Types of evidence</b>			
<b>Domain/HALO</b>	<b>Experience &amp; Logbook</b>	<b>Supervised Learning Events (SLEs)</b>	<b>Personal activities, reflections, other</b>
<b>Education &amp; training</b>	use of SLEs throughout stage of training to facilitate learning and guide progress.	reflection on learning in the workplace and response to feedback.	maintenance of professional portfolio on LLP setting out and review of personal development plans record of attendance at local and regional/school teaching sessions completion of GMC trainee survey teaching session delivered (presentation slides) attendance at pre-assessment (POA) or perioperative medicine (POM) clinic and reflection on learning production of patient educational materials attendance at hospital induction session(s) mandatory training simulation training use of e-Learning Anaesthesia engagement with feedback on education and training personal learning activities such as journal articles read and reflections on them.
<b>Research &amp; managing data</b>		use of evidence-based national or local guidelines accessing and interpreting evidence from the literature to aid shared-decision making.	presentation at journal club: academic paper, review article, national reports or guidelines such as CEMACH, NCEPOD, NICE undertaking or completed GCP certificate assisting with data collection for research project involvement in review article / literature review awareness of local Trainee Research Network activity (TRN).

## STAGE 1 PRACTICAL PROCEDURES CHECKLIST

*Please complete the details below and attach this checklist as a "Personal Activity" to your LLP (standalone modifiable word document available at <https://www.stokeanaesthesia.org.uk/>)*

*All procedures must be evidenced by an A-CEX, DOPS or simulation/course evidence (CPD certificate or SLE) by your end of year 3 ARCP. Most should be evidenced to the required supervision level although it is accepted that this may not be possible for those evidenced by attendance at simulation training.*

	Supervision level suggested	Supervision level achieved (if course put NA)	Which domain/HALO is SLE or CPD certificate linked to (e.g. General Anaesthesia, Regional etc)	Date of SLE/CPD certificate	Supervisor name or name of Course
Insertion of supraglottic airway	3				
Intubation using standard laryngoscope	3				
Intubation using video laryngoscope	2a				
Fibreoptic intubation	1				
Intubation in the awake patient	1				
Emergency front of neck access	2a				
Central venous line insertion	2b				
Venous access for renal replacement therapy	2b				
Arterial line	2b				
Ultrasound-guided peripheral venous cannulation	2b				
Needle thoracocentesis	2b				
Chest drain insertion	2a				
Lumbar epidural	3				
Spinal anaesthesia	3				
Simple peripheral nerve block	2b				
US-guided chest wall plane block	2a				
US-guided abdominal wall plane block	2a				
US-guided lower limb block including femoral and FIB	2a				
US-guided upper limb block including brachial plexus block	2a				