**ARCP Checklist 2025**

**(v2 March 25)**

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| Name: | GMC number: |
| Current CCT date: | IS your CCT date correct: YES/NO |
| 1st Post Dates: | 2nd Post Dates |
| 1st Post Specialty: | 2nd Post Specialty: |
| 1st Post Trust: | 2nd Post Trust: |
| 1st Post Grade: | 2nd Post Grade: |
| Clinical Supervisor: | Clinical Supervisor: |
| Educational Supervisor: | |
| ES email address: | |

***How to use this document:***

* This document is not mandatory but highly recommended and helps the panel.
* Edit the Checklist - either print it out or download an editable version
* Complete all the minimum requirements (based on current RCPCH guidance - [Assessment guide | RCPCH](https://www.rcpch.ac.uk/resources/assessment-guide)), you are encouraged to work beyond this, if possible, to maximise any educational opportunity.
* In your final Educational Supervisor meeting, review your progress using this checklist
* **Upload as an attachment to ARCP Preparation Form on potfolio**

**ARCP Panel Communication**

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| Please use this box to provide the ARCP panel with any further information you wish for them to know. Information entered here must concur with the information in your Educational Supervisor Trainer Report for ARCP. |
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**Supervision Meetings**

Your Educational Supervisor will remain the same for duration of CORE training, only changing when you enter SPECIALTY training when a new ES will be allocated until CCT. EVERY post also requires a locally allocated Clinical Supervisor (this is unlikely to be the same as your ES unless working in same department).

If your post is in the community, you will be allocated an additional Clinical Supervisor – one in your acute and one in your community trusts.

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| **Absences** - Please enter the number of days of absence. NB – this does not include Study/Annual Leave but must include parental leave / industrial action etc. Your Form R declaration and Risr logged absences MUST match. | Number of days | Form R / Kaizen same:  YES/NO |

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| --- | --- | --- |
| EACH POST | FIRST POST  Date completed | SECOND POST Date competed |
| **“Induction Meeting with PDP (**Educational Supervisor)”  – with Educational Supervisor |  |  |
| **“Clinical Supervisor Induction Meeting”** )”  – with Clinical Supervisor at start of EVERY post. If in community, this will be one meeting with community CS AND one meeting with acute CS. If your ES and CS are the same this form is not needed. |  |  |
| **“Midpoint Review”**  – with Educational Supervisor halfway |  |  |
| **“Midpoint Review”**  – with Clinical Supervisor halfway  . If your ES and CS are the same this is not needed |  |  |
| **“Placement reflection discussion (NOT for ARCP)”**  – with Educational Supervisor at end of post |  |  |
| **“Clinical Supervisor Trainer Report”**   * with Clinical Supervisor at end of post |  |  |

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| BEFORE / in READINESS of ARCP | Date completed |
| **“Educational Supervisor Trainer Report for ARCP”**  - with Educational Supervisor OR  **“Joint Educational and Clinical Supervisor Report for ARCP”** if ES and CS the same |  |
| **“Clinical Supervisor Trainer Report”**  - with Clinical Supervisor. If in community post, this will be one meeting with community CS AND one meeting with acute CS. |  |
| **“Readiness for Tier 2 rota”**  – with Educational Supervisor for ST3 only |  |
| **“ARCP preparation form”**  - resus and safeguarding courses document /attached  - CCT calculator attached  - FORM R attached |  |
| **Form R**  -uploaded to TIS and Kaizen preparation form  -absences all declared (and same as portfolio)  -SIG / complaints declared and reflected upon within portfolio |  |

**Portfolio Entries**

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| --- | --- | --- |
| DOCUMENT – please refer to [Assessment guide | RCPCH](https://www.rcpch.ac.uk/resources/assessment-guide) for latest changes / updates | DATES COMPLETED | COMMENT |
| **MSF**  For detailed guidance on MSF, who to invite, and how to use the system on Kaizen, have a look under the “Assessment” section on the RCPCH website.  1 assessment per training grade for ST1-7/8(S3) |  |  |
| **HAT**  1 assessment during ST1-2  1 assessment during ST3-4  Optional during ST5-7/8(S3) |  |  |
| **LEADER CbD**  Optional during ST1-2  1 assessment during ST3-4  1 assessment per training grade during ST5-7/8(S3) |  |  |
| **Safeguarding CbD**  1 assessment per training grade during ST1-7/8(S3) |  |  |
| **ECAT**  1 assessment for acute paediatrics take OR admission of a term or preterm baby to neonatal unit during ST1-3 BEFORE being independent on the tier 2 rota |  |  |
| **ACAT**  Optional ST1-ST7/8(S3) |  |  |
| **DOC**  Optional during ST1-3  2 assessments during ST4  Optional during ST5-7/8(S3) |  |  |
| **DOPS – for CORE curriculum**  Mimimum of 1 satisfactory DOPS for each compulsory procedure in the core curriculum before being independent on tier 2 rota |  |  |
| * Intraosseus needle insertion for emergency venous access |  |  |
| * Peripheral venous cannulation |  |  |
| * Lumbar Puncture |  |  |
| * Neonatal Umbilical venous cannulation (UVC) |  |  |
| **DOPS – for SPECIALTY curriculum**  Minimum of 1 satisfactory **AoP** for each compulsory procedure within the relevant sub-specialty curriculum at specialty level |  |  |
| **MiniCEX**  No minimum number – aim for high quality |  |  |
| **Case Based Discussion**  No minimum number – aim for high quality |  |  |
| **Personal Development Plan (PDP/Goals)**  No minimum or maximum number; can cover longer time periods than one post. (PDPs for longer term aims, Goals for a particular post) |  |  |
| * 1st Post – SMART, evidenced and marked as achieved/in progress… |  |  |
| * 2nd Post– SMART, evidenced and marked as achieved/in progress… |  |  |
| **Royal College Membership Exams**  Theory exams by the end of ST3 to allow progress to ST4 and tier 2 rota.  MRCPCH Clinical by the end of ST4. |  |  |
| * FOP |  |  |
| * TAS |  |  |
| * AKP |  |  |
| * Clinical |  |  |
| **Resus Courses:** |  |  |
| APLS/EPLS – before independent on tier 2 rota (updated every 4 years) |  |  |
| NLS – before independent on tier 2 rota (updated every 4 years) |  |  |
| Accredited resuscitation course relevant to specialty training pathway during ST5-8 |  |  |
| **Safeguarding Training:** |  |  |
| Optional during ST1/2/3  Mandatory ST4-St7/8(S3) |  |  |
| **START:** |  |  |
| START Assessment – in ST6 onwards |  |  |
| START PDP – in ST7 onwards - evidenced and marked as achieved |  |  |
| START Reflection |  |  |
| **CSAC Report**  – GRID trainees only – needs to recommend an outcome 6 for those aiming for an outcome 6 at their corresponding WM ARCP |  |  |
| **Clinic Attendance:**  This is not mandated but recommended |  |  |
| **Audits and QIPs (optional)** |  |  |
| **Research/clinical questions (optional)** |  |  |
| **Reflection:**  Required to reflect on any “Critical Incidents” or untoward events as input on your Form R. This is a GMC requirement. Reflections can also be used to help demonstrate completion of the curriculum (see Progress guidance for help). |  |  |
| **GMC / NETS surveys**  Not compulsory, but strongly encouraged |  |  |
| **Curriculum**  **ALL:**  Relevant evidence has been added to the key capabilities for each domain of appropriate curriculum, avoiding multi tagging and showing progress through training.  **COMPLETION of CORE / SPECIALTY:**  It is **essential** that Educational Supervisor reviews evidence as being relevant, of high quality and not multi tagged. All key capabilities have been appropriately evidenced and commented upon within ARCP report | YES/NO  YES/NO |  |