**Annual Structured Report**

**Core Trainees**

To be completed electronically by the Educational Supervisor. The Educational Supervisor should send the complete document to the Trainee by email. This should then be saved as ‘ASR (DD/MM/YYY)’ in the ‘Supervision’ folder of Trainee’s ePortfolio.

This report will be used at the Annual Review of Competence Progression. The Trainee should complete parts of the form before and their Educational Supervisor should complete it at a meeting with the Trainee. The ASR is a summary of the evidence in the Trainee’s ePortfolio, an assessment of the Trainee’s progress towards their objectives for the period covered by the ARCP. It should highlight any gaps in evidence in the ePortfolio e.g. insufficient number of WPBAs, if WPBAs have not been completed by appropriate raters, missing Supervisor reports, absence of evidence relating to each area (e.g. a statement that a Quality Improvement has been completed, but no evidence of the completed Quality Improvement in the ePortfolio etc.

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| **Trainee Details** |
| **Full Name** |       | **NTN** |       |
| **Training Programme** |  |
| **Year of Training**  |       |

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| **Educational Supervisor Details** |
| **Name of Educational Supervisor** |       |

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| **Last ARCP** |
| **Date** | **Period covered** | **Outcome** | **If not Outcome 1, summarise action required and progress made** |
|  | From | To |
|  |       |       |       |       |

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| Previous Placements | Dates |
| **No** | **Clinical Supervisor** | **Specialty & Location** | **From**  | **To** |
| **1** |       |       |       |       |
| **2** |       |  |  |  |
| **3** |       |  |  |  |
| **4** |       |  |  |  |
| **5** |       |  |  |  |
| **6** |       |       |       |       |
| **7** |  |  |  |  |
| **8** |  |  |  |  |

**Section 1: Evidence Summary**

**Workplace-Based Assessments (WPBAs) in this ARCP Year**

*The Trainee should enter details about each assessment on this table prior to the meeting with their Educational Supervisor. The Educational Supervisor must review all WPBAs in the Trainee’s portfolio and document any areas where a need for development has been identified in WPBAs as well as reporting on action taken and progress made.*

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| **Assessment** | **No.** | **Date of Assessment** | **Outcome** *(numerical score for performance at this stage of training)* | **Name and Job Title of Assessor** |
| **ACE** | (1) |       |       |       |
| (2) |       |       |       |
| (3) |       |       |       |
| (4) |       |       |       |
| (5) |       |       |       |
| (6) |       |       |       |
| **Mini-ACE** | (1) |       |       |       |
| (2) |       |       |       |
| (3) |       |       |       |
| (4) |       |       |       |
| (5) |       |       |       |
| (6) |       |       |       |
| (7) |       |       |       |
| (8) |       |       |       |
| (9) |       |       |       |
| **DOPs** | (1) |       |       |       |
| (2) |       |       |       |
| **CBD** | (1) |       |       |       |
| (2) |       |       |       |
| (3) |       |       |       |
| (4) |       |       |       |
| (5) |       |       |       |
| (6) |       |       |       |
| (7) |       |       |       |
| (8) |       |       |       |
| (9) |       |       |       |
| **Mini-PAT** | (1) |       |       |       |
| (2) |       |       |       |
| **Other (describe):** |  |       |       |       |
| **Development Requirements***Areas identified in WPBAs where developments are required* |       |
| **Action(s) taken or to be Taken** |       |

**Experiential Outcomes**

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| **Activity** | **Development(s)** |
| **Emergency Experience***Number of first line management cases during Core Training (cumulative)* | Number of cases completed:      /50WPBAs completed which demonstrate competence:       |
| **Psychotherapy** *To this point in training – confirmation of Case Based Discussion Group, supervised cases and Psychotherapy WPBAs* | Case Based Discussion Group attendance (Number of sessions attended):      Short Case completed: **Yes [ ]  No [ ]** Summary of Case/Work in Progress:      Long Case completed: **Yes [ ]  No [ ]** Summary of Case/Work in Progress:      Psychotherapy WPBAs completed (Number, type and outcome):      Summary of other evidence of psychotherapy experience in portfolio:      Competencies for Core Training achieved?**Yes [ ]  No [ ]**  |
| **Teaching** *Include information about the audience, topic and form of evidence* | Teaching Material in portfolio: **Yes [ ]  No [ ]** Details (if applicable):      WPBAs: **Yes [ ]  No [ ]** Details (if applicable):       |
| **ECT***Trainees are expected to be trained and have experience in the administration of ECT. A DOPS of satisfactory administration of ECT is required to demonstrate competence.*  | ECT training attended: **Yes [ ]  No [ ]** Satisfactory DOPS: **Yes [ ]  No [ ]**  |
| **Quality Improvement (Including Audit)***Record title and role of the Trainee in each audit undertaken since the last ARCP* |       |
| **Publications** *Full title, reference and role in publication* |       |
| **Presentations** *Academic/research activities at regional, national and/or international level (this does not include Case Conference or Journal Club presentations)* |       |
| **Management Development** |       |
| **Does the Trainee have evidence that they have completed the GMC Trainee Survey?**  | **Yes** **[ ]  No** **[ ]**  |
| **Does the Trainee have evidence that they have completed the YHD Deanery Trainee Survey?**  | **Yes [ ]  No [ ]**  |

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| **Other Outcomes** | **Date(s)** | **Comments/Notes** |
| **Involvement in Serious Incidents** |       | *Give details of how the Trainee was involved. Please specify if Trainee practice was found to be a concern and if any action has been or will be taken.*      |
| **Other incidents** |       | *Give details of how the Trainee was involved. Please specify if Trainee practice was found to be a concern and if any action has been or will be taken.*      |
| **Complaints** |       | *Give details of how the Trainee was involved. Please specify if Trainee practice was found to be a concern and if any action has been or will be taken.*      |
| **Sick Leave** |       |       |
| **Other Leave** *(e.g. Maternity, Paternity, Carer, Compassionate)* |       |       |

**Examination Progress**

|  |  |  |  |
| --- | --- | --- | --- |
| **Exam** | **Date(s) taken** | **Passed/ Failed** | **Notes/Action Points/Re-sits** |
| **Paper 1** |       |       |       |
| **Paper 2** |       |       |       |
| **Paper 3** |       |       |       |
| **CASC** |       |       |       |
| **Other Exams** |       |       |       |

**Section 2: Overall Summary**

*The Educational Supervisor should rate the Trainee’s performance in each of the following domains on the basis of all reports, WPBAs and other evidence in the Trainee’s ePortfolio. This assessment is a summary of all evidence gathered since the last ARCP. In assessing these domains, the Educational Supervisor should rate the Trainee against their expectations for the current level of Training. When this report is completed in the final placement of CT1 the Educational Supervisor should rate the Trainee against the standard expected for completion of that stage of Training.*

*Excellent – exceeds curriculum requirements*

*Competent – meets curriculum requirements*

*Needs further development – has not achieved standard required for curriculum*

*Insufficient evidence – does not have enough relevant evidence in portfolio to enable a rating to be made*

***Essential clinical competencies for CT1 are underlined and must be evidenced with reference to WPBAs***

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| **Professional Competences** *If a Trainee is rated as ‘excellent’, or ‘needs further development’, please ensure that further information is provided.* |
| 1. Clinical Assessment | **Includes the clinical assessment of patients with mental health problems in relation to history-taking, mental state examination, physical examination, Provide evidence from WPBAs (e.g. ACE, mini-ACE, CBD and multi-source feedback)** |
| Interview skills:WPBA Evidence: Needs further development [ ]  Competent [ ]  Excellent [ ] Elicit a clinical history:WPBA Evidence: Needs further development [ ]  Competent [ ]  Excellent [ ] Perform a mental state examination:WPBA Evidence:Needs further development [ ]  Competent [ ]  Excellent [ ] Perform a cognitive screening assessment:WPBA Evidence:Needs further development [ ]  Competent [ ]  Excellent [ ] Perform a physical examination:WPBA Evidence:Needs further development [ ]  Competent [ ]  Excellent [ ] Assessment of capacity:WPBA Evidence:Needs further development [ ]  Competent [ ]  Excellent [ ]  |
| 2. Formulation and management | **Includes the application of scientific knowledge to patient formulation and management, access to appropriate care and treatment.** **Provide evidence from WPBAs (e.g. ACE, mini-ACE, CBD and multi-source feedback)** |
| Present a clinical case (with basic management plan):WPBA Evidence:Needs further development [ ]  Competent [ ]  Excellent [ ] Prescribe safely in psychiatry:WPBA Evidence:Needs further development [ ]  Competent [ ]  Excellent [ ] Write a clinical letter or report:WPBA Evidence:Needs further development [ ]  Competent [ ]  Excellent [ ]  |
| 3. Risk assessment | **Includes the assessment and management of risk in psychiatry. Provide evidence from WPBAs, particularly ACE, mini-Ace, CBD and multi-source feedback** |
| Perform a suicide risk assessment:WPBA Evidence:Needs further development [ ]  Competent [ ]  Excellent [ ]  |
| 4. Maintaining Good Medical Practice | **Includes the knowledge of systems to update knowledge and its application to professional practice. Also includes legislation concerning patient care, the rights of patients and carers, research and keeping up-to- date with clinical advances. Consider evidence from Trainee’s portfolio, and their individual learning plan and any record of educational supervision they have kept.** |
| Insufficient Evidence [ ]  Needs further development [ ]  Competent [ ]  Excellent [ ]  |
| 5. Maintaining Performance | **Includes routine practice of critical self-awareness, working with colleagues to monitor and maintain quality of care and active participation in a programme of clinical governance. Evidence to consider includes multi-source feedback, records of audit, research projects and Trainees reflective notes on them.** |
| Insufficient Evidence [ ]  Needs further development [ ]  Competent [ ]  Excellent [ ]  |
| 6. Teaching & Training; assessing and appraising | **Includes the planning, delivery and evaluation of learning and teaching, appraising and evaluating learning and learners; supervising and mentoring learners and providing references. Consider evidence multi-source feedback, completed Assessment of Teaching forms and any quality data kept by the relevant teaching faculty or programme.** |
| Insufficient Evidence [ ]  Needs further development [ ]  Competent [ ]  Excellent [ ]  |
| 7. Relationships with Patients and Carers | **Includes conduct of professional patient relationships, good communication, obtaining consent, respecting confidentiality, maintaining trust and ending professional relationships with patients. Consider evidence from WPBAs, particularly the ACE, mini-ACE, CBD and multi-source feedback.** |
| Insufficient Evidence [ ]  Needs further development [ ]  Competent [ ]  Excellent [ ]  |
| 8. Dealing with Problems in Professional Practice | **Competence when dealing with situations where there are concerns regarding the conduct or performance of colleagues, handling complaints and formal inquiries, holding indemnity insurance and providing assistance at inquiries and inquests. Evidence to consider will include CBD, multi-source feedback and reflective notes, including critical incident reports.** |
| Insufficient Evidence [ ]  Needs further development [ ]  Competent [ ]  Excellent [ ]  |
| 9. Relationships with Colleagues | **Includes treating colleagues fairly, by working to promote value-based non-prejudicial practice; working effectively as a member and leader of a multidisciplinary team, arranging clinical cover, taking up appointments, sharing information with colleagues and appropriate delegation/referral. Consider evidence from CPB and multi-source feedback** |
| Insufficient Evidence [ ]  Needs further development [ ]  Competent [ ]  Excellent [ ]  |
| 10. Maintaining Probity | **This competency illustrates maintaining appropriate ethical standards of professional conduct which may include the following: providing information about your services; writing reports, giving evidence and signing documents; carrying out and supervising research; properly managing financial and commercial dealings; avoiding and managing conflicts of interest and advising others on preventing and dealing with them and appropriately managing financial interests that may have a relevance to professional work. Evidence to consider will include CBD and multi-source feedback and your review of reports written by the Trainee** |
| Insufficient Evidence [ ]  Needs further development [ ]  Competent [ ]  Excellent [ ]  |
| 11. Ensuring Health Problems do not put patients at Risk | **This competency relates to the doctor’s awareness of when his/her own performance, conduct or health, or that of others, might put patients at risk and the action taken to protect patients. Behaviours you may wish to consider: observing the accepted codes of professional practice, allowing scrutiny and justifying professional behaviour to colleagues, achieving a healthy balance between professional and personal demands, seeking advice and engaging in remedial action where personal performance is an issue.**  |
| Insufficient Evidence [ ]  Needs further development [ ]  Competent [ ]  Excellent [ ]  |

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|  | **Yes** | **No** |
| **Confirmation of Training Passport** | [ ]  | [ ]  |

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| **Further Information on Professional Competences***Further information and clarification must be provided if any domains above are rated as ‘excellent’, ‘insufficient evidence’ or ‘needs further development’*  |
| Areas of achievement *Provide reason for each “Excellent” rating above* |       |
| Areas for development*Provide reason for each “Needs further development” rating above* |       |
| Areas in which there is insufficient evidence*Highlight any areas in which insufficient evidence to rate performance has been provided and any reason for lack of evidence* |       |
| Probity or other concerns in the period covered |       |

*I certify that this form is an accurate representation of evidence presented in the above named Trainee’s portfolio for the Annual Review of Competence Progression.*

**Form completed by (Educational Supervisor):**

**Date:**