

## National Anaesthetic ARCP Checklist Covid-19

\*\* 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	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
	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
Placements in programme	Hospital placement or placements since last ARCP
Examinations	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.
Milestones	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
Personal Development Plan (PDP)	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.
Logbook	New objectives can be added to the PDP as they occur through the year 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:  1. A logbook of cases since the last ARCP 2. A cumulative logbook of cases from the start of core training
Supervisory meeting	Evidence of a minimum of three meetings per year.  This could be:  1. Supervisor meetings completed on LLP 2. ESSR completed at end of placement 3. An uploaded document such as the School's own supervisor meeting form  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
Review unit progress	ESSR  CUT forms completed between the ESSR start and end date should

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	appear here.	training		
		Minimum required units for stages of training:  1. CT1 (Anaes) Introduction to anaesthesia 8 units. IAC		
	2. CT2 (ACCS) Introduction to anaesthesia 8 units. IAC			
		our IAC due to Covid-19 then please		
	detail this in the learner's com			
	3. CT2 (Anaes) CT3 (ACCS) All c	ore units. IACOA		
	If you have not completed al	core units or your IACOA due to		
	·	nis in the learner's comments section		
	of the ESSR			
	4. ST4 All intermediate units inclu			
		intermediate units of training due to		
	of the ESSR	nis in the learner's comments section		
		ne year of advanced training units,		
	domains 1-6	rie year of advanced framing offis,		
		training (including 9 GeneralDuties		
		rder to gain a CCT. If you have been		
		aining due to Covid-19 then please		
	detail this in the learner's com			
	Advanced training will be rev	iewed. If less than 12 months has		
	been competed due to Covi	d-19 but the learning outcomes have		
		be accepted for completion of		
	_	e total time that you have spent in		
		1-6 of advanced training will need to		
	be completed.			
		ed training has been completed		
		to extend training to complete this earner's comments section of the		
	ESSR	editier 3 confinents section of the		
Workplace based	WPBAs completed during the ESSR st	art and end date should appear		
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Workplace based assessments	here			
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		Data callegation formation	
		Data collection for national studies	
		Good Clinical Practice certificate	
		Research meeting attendance Journal club attendance	
		Prizes	
	Improvement science, safe and	Evidence of involvement in an	
	reliable systems	audit or quality improvement (QI)	
	Teliable systems	project (see above)	
		Attendance at departmental QI	
		meetings eg 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, paren	tal leave, compassionate leave and	
	leave for military duties if applicable		
Form R (Eng, Wales, NI)	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 be reflected upon.  If there have been no concerns or investigations but NONE		
or SOAR (Scotland)			
Revalidation document			
Details of any assessment			
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 BE		
Comments		eleted reflecting on progress since the	
Comments	last ARCP and aspirations for the cor		
	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:		
Reliective plactice	Reflection can be done on positive of	as well as negative events. It is	
	equally important to learn from exce		
	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 for		
	Throdiess in maining, we ask mese schools to consider the necessity for		

their extra ARCP requirements, to be sensitive to the concerns of trainees, and to guide them in achieving the necessary standard.

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.

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. There is no requirement for a set number of reflections There must be evidence of reflection as written in the Educational Supervisor's comment.

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.