**ARCP Checklist 2025 Progress Plus**

| Name: | GMC number: | Current CCT date: |
| --- | --- | --- |
| 1st Post (i.e. Paeds, Neonates, etc) | Level (i.e. ST1, ST2, etc) | Dates(i.e. Sept 2022-March 2023) |
|  |  |  |
| 2nd Post | Level | Dates |
|  |  |  |
| 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), you are encouraged to work beyond this, if possible, to maximise any educational opportunity.
* If the requirements of this ARCP Checklist are met, then the overall requirements for your training level on your e-portfolio should be automatically populated.
* In your final Educational Supervisor meeting, review your progress using this checklist and the e-portfolio ARCP preparation form as a guide
* **Upload as an attachment to ARCP Preparation form on Kaizen.**

**ARCP Panel Communication**

| Please use this box to provide the ARCP panel with any further information you wish for them to know, including if you wish to be considered for capability based progression to the next training grade. Information entered here must concur with the information in your Educational Supervisor Trainer Report for ARCP. Further information of things you may wish to include can be found within the ‘ARCP Top Tips’ document and at https://www.rcpch.ac.uk/resources/paediatric-training-capability-based-progression |
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|  |

**Supervision Meetings**

In your first post of the academic year your Educational Supervisor is also your Clinical Supervisor. They will then remain your Educational Supervisor throughout the year.

For the second six months, (i.e. the next post), you will be allocated a separate Clinical Supervisor in your new rotation. In community posts you should always be allocated a Clinical Supervisor in your acute trust. If your second post is in the community, you will be allocated a Clinical Supervisor in both your acute and community trusts.

| **Absences** - Please enter the number of days of absence. NB – this does not include Study/Annual Leave. It should match your Form R declaration and Kaizen logged absences |  |
| --- | --- |
| FIRST POST | Date completed |
| **“Induction Meeting with PDP (**Educational Supervisor)” – with Educational Supervisor at start pf post N.B. If in community post, or your CS is different to your ES, you will need an additional “Clinical Supervisor Induction Meeting” |  |
| **“Midpoint Review”** – with Educational Supervisor halfway through N.B. If in a community post, or your CS is different to your ES, you will need an additional “Midpoint Review” meeting with your CS |  |
| **“Placement reflection discussion (NOT for ARCP)”**– with Educational Supervisor at end of post N.B. If your ES and CS are different, you will need an “End of Placement Summary Report” with your ES, and “Clinical Supervisor Trainer Report” with your CS |  |
| SECOND POST |  |
| **“Induction Meeting with PDP (Educational Supervisor)”** – with Educational Supervisor |  |
| **“Clinical Supervisor Induction Meeting”**If in community post, this will be one meeting with community CS AND one meeting with acute CS. If your ES and CS are the same this is not needed. |  |
| **“Midpoint Review”** – with Educational Supervisor |  |
| **“Midpoint Review”** – with Clinical SupervisorIf in community post, this will be one meeting with community CS AND one meeting with acute CS. If your ES and CS are the same this is not needed |  |
| **“Clinical Supervisor Trainer Report”** - with Clinical SupervisorIf in community post, this will be one meeting with community CS AND one meeting with acute CS. If your ES and CS are the same this is not needed. |  |
| **“Educational Supervisor Trainer Report for ARCP”** with Educational Supervisor OR **“Joint Educational and Clinical Supervisor Report for ARCP”** if ES and CS the same BEFORE ARCP |  |

|  **“Trainer report – readiness for Tier 2”** – with Educational Supervisor for ST3 only  |  |
| --- | --- |
| **“ARCP preparation form”** - to document resus and safeguarding courses |  |

**Portfolio Entries**

| DOCUMENT | 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 every ST year/per training grade for ST1-8  |  |  |
| **HAT**1 assessment during ***ST1-2*** 1 assessment during **ST3-4** Optional during **ST5-8** |  |  |
| **LEADER CbD**Optional during ST1-2 1 assessment during ST3-4 1 assessment per training grade during ST5-8 |  |  |
| **Safeguarding CbD** 1 assessment per training grade during ST1-8 |  |  |
| **ECAT MiniCEX** **Suggested** 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 rotaOptional during ST1-8 |  |  |
| **DOC**Optional during ***ST1-3*** 2 minimum during ***ST4*** **Optional during ST1-8**Encouraged to complete 5 per year from ST4 onwards |  |  |
| **DOPS – for CORE curriculum** Mimimum of 1 satisfactory DOPS for each compulsory procedure in the core curriculum before being independent on tier 2 rota. \*IO and airway DOPS **only** may be completed in simulated environments\*  |  |  |
| * Intraosseus needle insertion for emergency venous access\*
 |  |  |
| * Peripheral intravenous cannulation
 |  |  |
| * Lumbar Puncture
 |  |  |
| * Umbilical venous cannulation
 |  |  |
| **DOPS – for SPECIALTY curriculum**Minimum of 1 satisfactory **AoP** for each compulsory procedure within the relevant sub-specialty curriculum for specialty level PGDiTs  |  |  |
| **MiniCEX including** No minimum number – aim for high quality |  |  |
| **ACAT (optional)** |  |  |
| **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 – evidenced and marked as achieved/in progress/carried forward
 |  |  |
| * 2nd Post– 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 |  |  |
| **Other Certified Courses (Optional)** |  |  |
| Level 3 course – ST3 onwards (updated every 3 years) |  |  |
| **START:** |  |  |
| START Assessment – in ST6 onwards  |  |  |
| START PDP – in ST7 onwards - marked 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 – aim 10 clinic per year |  |  |
| **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). (NB – There are no minimum requirements for reflections, but they are encouraged) |  |  |
| **GMC / NETS surveys**Upload to documents folderNot compulsory, but is strongly encouraged |  |  |
| **Form R – Part A and Part B** Completed on TIS self service Ensure absences and locum shifts enteredUpload a copy to Documents folder (optional) |  |  |
| **CCT Calculator** It is helpful to upload your CCT calculator, but this is not mandatory. Training gaps need to be added. Link for CCT calculator - <https://www.rcpch.ac.uk/resources/completion-training-date-calculator> |  |  |
| **Training Level Requirements (on Kaizen)** – in progress or completed at progression points from core to specialty level training or from specialty level to CCT  |  |  |
| **Curriculum Sign Off****ALL:** Relevant evidence has been added to the key capabilities for each domain of appropriate level’s learning outcomes, avoiding multi tagging and showing progress through your level of training.**TRAINING LEVEL CHANGE:**It is **essential** that Educational Supervisor reviews evidence as being relevant, of high quality and not multi tagged. Once all key capabilities have been appropriately evidenced, ES must mark each learning outcome as 'achieved' via their Eportfolio.To progress to the next level of training, **all** the learning outcomes need to be marked as achieved for your current level of training. | YES/NOYES/NO |  |