Through creative partnerships we shape and develop a workforce that impacts positively on health and wellbeing for all

We are the Local Education and Training Board for Kent, Surrey and Sussex
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Introduction – HE KSS School of Paediatrics

We would like to take this opportunity on behalf of the School of Paediatrics to welcome you to the Health Education Kent Surrey and Sussex Training Programme for Paediatrics. Congratulations on your appointment and we wish you every success during your time in Paediatrics training with us.

Dr Peter Martin
HE KSS Head of School of Paediatrics

Dr Sethu Wariyar
HE KSS ST1-3 Surrey & W. Sussex Training Programme Director

Dr Rob Bomont
HE KSS ST1-3 Kent & E. Sussex Training Programme Director

Dr Bov Jani
HE KSS ST4 & ST5 Training Programme Director

Dr Sarah Birks
HE KSS ST6+ Training Programme Director

Karen Gomes
Specialty Workforce Coordinator

Siobhan Gallagher
Specialty Workforce Programme Mngr

Adeola Teluwo
Specialty Workforce Administrator
### Important Contacts and their roles & responsibilities

It can be quite confusing knowing who to contact when you have an enquiry. Below is a list of the contacts at HEKSS with a summary of their responsibilities to guide you to the correct person. Please don’t hesitate to contact them when you need assistance.

#### HE KSS Deanery Contacts and Responsibilities

<table>
<thead>
<tr>
<th>Name &amp; Contact Details</th>
<th>Role &amp; Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Peter Martin</strong>&lt;br&gt;<a href="mailto:peter.martin@asph.nhs.uk">peter.martin@asph.nhs.uk</a></td>
<td><strong>Head of School</strong>&lt;br&gt;The Head of School is responsible for ensuring delivery of training within Paediatrics across HE KSS.</td>
</tr>
<tr>
<td><strong>Sethu Wariyar (level 1 trainees)</strong>&lt;br&gt;<a href="mailto:Sethu.Wariyar@asph.nhs.uk">Sethu.Wariyar@asph.nhs.uk</a></td>
<td><strong>Training Programme Directors</strong>&lt;br&gt;The Training Programme Directors are appointed by the School of Paediatrics and ensure that the generic training within Paediatrics runs smoothly. The college tutors of each trust work directly with the TPD’s, if you have any concerns about your training and would rather discuss the issues with someone outside of your Trust - the TPD would be your contact.</td>
</tr>
<tr>
<td><strong>Rob Bomont (level 1 trainees)</strong>&lt;br&gt;<a href="mailto:Rob.Bomont@bsuh.nhs.uk">Rob.Bomont@bsuh.nhs.uk</a></td>
<td><strong>Specialty Workforce Programme Manager</strong>&lt;br&gt;Appointed and based at HE KSS and works with Head of School and all other members of the school as the non-clinical lead this is the person to contact regarding any administrative matters or when you are not sure of whom to contact regarding any issues.</td>
</tr>
<tr>
<td><strong>Bov Jani (level 2 trainees)</strong>&lt;br&gt;<a href="mailto:bov.jani@medway.nhs.uk">bov.jani@medway.nhs.uk</a></td>
<td><strong>Specialty Workforce Coordinator</strong>&lt;br&gt;Assisting the Medical Workforce Projects Officer and working with the Medical Workforce Administrator regarding any administrative matters and providing help and support for ePortfolio, trainee data, and Regional Training Day queries.</td>
</tr>
<tr>
<td><strong>Sarah Birks (level 3 trainees)</strong>&lt;br&gt;<a href="mailto:sarah.birks1@nhs.net">sarah.birks1@nhs.net</a></td>
<td><strong>Specialty Workforce Administrator</strong>&lt;br&gt;Works with the Medical Workforce Projects Officer and may be able to provide help and support for, Intrepid (i.e. Deanery database of trainees), ePortfolio, Regional Training Days (RTD) and the School of Paediatrics website.</td>
</tr>
<tr>
<td><strong>Siobhan Gallagher</strong>&lt;br&gt;<a href="mailto:paediatrics@kss.hee.nhs.uk">paediatrics@kss.hee.nhs.uk</a></td>
<td><strong>Trainee Representatives</strong>&lt;br&gt;Represents all Paediatrics Trainees currently managed by HE KSS (ST1 to ST8). Attends the Committee meetings quarterly to feedback any issues raised regarding training programmes.</td>
</tr>
<tr>
<td><strong>Karen Gomes</strong>&lt;br&gt;<a href="mailto:paediatrics@kss.hee.nhs.uk">paediatrics@kss.hee.nhs.uk</a></td>
<td><strong>Tel</strong>: 020 7089 7509</td>
</tr>
<tr>
<td><strong>Adeola Teluwo</strong>&lt;br&gt;<a href="mailto:paediatrics@kss.hee.nhs.uk">paediatrics@kss.hee.nhs.uk</a></td>
<td><strong>Tel</strong>: 020 7089 7509</td>
</tr>
<tr>
<td><strong>ST3 – Neil Anthony-Pillai</strong>&lt;br&gt;<a href="mailto:neilap@gmail.com">neilap@gmail.com</a></td>
<td><strong>ST4/ST5 – Alex Rodrigues Da Costa</strong>&lt;br&gt;<a href="mailto:aalexrodriguesdacosta@gmail.com">aalexrodriguesdacosta@gmail.com</a></td>
</tr>
<tr>
<td><strong>ST6 – Julia Fozard</strong>&lt;br&gt;<a href="mailto:julioazard@doctors.net.uk">julioazard@doctors.net.uk</a></td>
<td><strong>ST7 - Eleanor Glenday</strong>&lt;br&gt;<a href="mailto:eleanorglenday@doctors.org.uk">eleanorglenday@doctors.org.uk</a></td>
</tr>
<tr>
<td><strong>ST8 - Louise Budd</strong>&lt;br&gt;<a href="mailto:lcbudd@doctors.org.uk">lcbudd@doctors.org.uk</a></td>
<td><strong>ST8 - Louise Budd</strong>&lt;br&gt;<a href="mailto:lcbudd@doctors.org.uk">lcbudd@doctors.org.uk</a></td>
</tr>
</tbody>
</table>
Trust Contacts and Responsibilities
Please ensure that you obtain contact information for the following roles at your trust induction:

<table>
<thead>
<tr>
<th>Name &amp; Contact Details</th>
<th>Role &amp; Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>College Tutor</strong></td>
<td>Each trust has a college tutor or equivalent for Paediatrics. They are responsible for ensuring the quality of Paediatrics training within your trust. The college tutors will assign you an educational supervisor and lead on your in-house teaching. They are your first port of call for any concerns you have about your training or ARCP.</td>
</tr>
<tr>
<td><strong>Medical Education Managers</strong></td>
<td>Each of the trusts has a postgraduate centre which is responsible for providing training and teaching for all trainees within the trusts, working closely with the Directors of Medical Education and College Tutors they co-ordinate training programmes and specialty specific teaching as well as trust training and generic teaching.</td>
</tr>
<tr>
<td><strong>Medical Staffing</strong></td>
<td>Being employees of the trust, medical staffing is where you should go for all employee related issues including pay, leave, contracts and removals etc. You can usually get hold of medical staffing via your switchboards.</td>
</tr>
<tr>
<td><strong>Educational Supervisor</strong></td>
<td>This is a Consultant allocated to you for your current year of training. The ES has an overview of your training and is responsible for your educational planning and career development. (If you are dual accrediting you should have an ES for each specialty). It is your responsibility to proactively arrange regular meetings with your ES to ensure your Personal Development Plan (PDP) and ePortfolio is reviewed. It is recommended that ES should spend the equivalent of 1 hour per week per trainee to allow time for educational support through appraisal, assessment, teaching or support. You must complete a Structured Training Report with them and document it on ePortfolio at the end of each training year.</td>
</tr>
<tr>
<td><strong>Clinical Supervisor</strong></td>
<td>This is a consultant who is responsible for overseeing the trainees who rotate through their departments Work Place Based Assessments (WPBA) and providing feedback. A trainee may have more than one.</td>
</tr>
</tbody>
</table>
HE KSS, College and GMC Responsibilities

There are three main bodies involved in your training. An outline of their responsibilities to your training:

Health Education Kent Surrey & Sussex (HE KSS)

HE KSS is responsible for the:
- Recruitment of trainees
- Annual Review of Competence Progression (ARCPs)
- Allocation of a National Training Number (NTN) for CCT, CESR or CESR CP
- Management of training programmes
- Quality Assurance of training in HE KSS
- Management of trainees who are working less than full time
- Management of refugee doctors’ scheme
- Approval of various OOPs
- Management of trainees in difficulty
- Management of the Specialty Schools

The Royal College

The Colleges are responsible for the:
- Strategic development of the speciality
- National manpower planning
- Development and management of the speciality curriculum
- Establishing training standards
- Registration of trainees and determining projected CCT/CESR/CESR CP dates
- Specialty education initiatives and examinations

General Medical Council (GMC)

The GMC has a statutory responsibility for the:
- Standards of Post Graduate Medical Education
- Inspection of Deaneries & Foundation Schools
- Setting standards for trainers & supervisors
- Curriculum approval
- Prospective approval of training posts
- Prospective approval of OOPs
- Managing and analysing the annual trainee and trainer surveys
- Final award of the CCT, CESR or CESR (CP) to trainees

Please see appendix A for details of the 9 GMC domains and standards.
Trainee Responsibilities

- Educational agreement with HE KSS
- GMC Good Medical Practice
- Work effectively as an employee
- Equality and Diversity trained and Human Rights
- Maintain contact with your TPD, Educational Supervisor and Clinical Tutor
- Maintain an up-to-date Portfolio and CV
- Participate in your appraisal
- Be aware of what is required for assessment
- Form R - keeping Deanery informed of contact details
- GMC Survey (mandatory toward final sign off at ARCP)
- Report any long term sickness, Parental leave and Resignation to HE KSS in addition to the Trust Medical Staffing department
- Workplace based assessments are completed throughout the training year, and in good time for ARCP

Engagement in the programme:

- Ensure membership of your Royal College
- Attend teaching sessions and training days
- Know and link training opportunities to your curriculum
- Close the loop on audits
- Prepare for examinations well in advance
- Maintain an up-to-date Portfolio and CV
- Maintain logbooks
- Develop your communication skills
- Respond to emails promptly
Curriculum(a)

UK training in Paediatrics is competency-based. It is expected that trainees will take eight years to gain a CCT. The programme is divided into three levels: level 1, level 2 and level 3 training. Successful completion of the programme will lead to the award of a Certificate of Completion of Training (CCT) or a Certificate of Eligibility for Specialist Registration (CESR). The content and structure of the training programmes are determined by the Royal College of Paediatrics and Child Health and approved by the General Medical Council (GMC). The delivery of the programme is overseen by Postgraduate Deans in conjunction with the HE KSS Specialty Training Committees.

The curriculum is integral to ePortfolio and all the assessment requirements are mapped against it. It is essential that Paediatric trainees and trainers understand this curriculum as their whole programme is based on it.

The Curriculum includes:

- The competences that need to be achieved by trainees through their stages of training in becoming a paediatrician
- The assessment strategy through the whole of their training to successful completion and the award of a Certificate of Completion of Training (CCT)

Using the Curriculum and its benefits

- Trainees will be able to develop their personal development plans and chart their progress through training, ensuring they are gaining the appropriate experiences and continuing to develop towards being a consultant. This contributes to appraisal, self-assessment, self-directed learning and educational meetings.
- The curriculum gives the doctor in training and their tutors’ guidance about the areas that need to be covered. It gives a clear picture of what has to be achieved by the end of each stage of training. The curriculum can be used to help identify areas of practice that need to be improved and those in which the trainee has confidence.
- Tutors will be able to ensure local teaching programmes map to the curriculum.
- Lay people will be able to see what their paediatricians are working towards in their training.

The Royal College of Paediatrics and Child Health

http://www.rcpch.ac.uk/home

It is a mandatory requirement for all trainees to be registered with the appropriate Royal College; therefore Paediatrics Trainees must be registered with the Royal College of Paediatrics and Child Health in order to gain access to the ePortfolio. If you are not registered the School of Paediatrics will not complete your Annual Review of Competence Progression (ARCP).
E-Portfolio

Important Update

The RCPCH is developing a new ePortfolio system that integrates the current ePortfolio and ASSET into a single platform with a single log on.
We wanted to let you know that the system will go live a little later than anticipated. This is to ensure that it has been fully user tested and that the appropriate guidance and training is in place for those using the new system.

The final dates are as follows:
Phase 1 – affecting West Midlands and Scotland users ONLY. This will not affect those in these regions who are not in run through training. Those users will be included in the second phase

- 14th November – ASSET and the current ePortfolio will no longer be accessible
- 7th December – new RCPCH ePortfolio system will go live

Phase 2 – affecting all other users including those who use ePortfolio as a non-run through trainee.

- 19th December – ASSET and the current ePortfolio will no longer be accessible
- 20th January – new ePortfolio system will go live

ePortfolio

This web-based portfolio is run by the Royal College of Paediatrics and Child Health; this provides a record of progress through training and the achievement of competencies, based on the relevant curricula. The ePortfolio contains details of the curriculum and assessments required at each stage of your training, a template for your Personal Development Plan and areas where you can reflect on your learning. Induction Reports, Mid-Point Review’s, Educational Supervisor Reports and ARCP outcomes are also contained here. https://www.nhseportfolios.org

ASSET (Assessment Services for Education and Training) is the RCPCH owned Web-based Assessment Facility and has an in-house team to manage and deliver all workplace based assessments. As a new trainee you will need to undertake online assessments, you must first enrol with the College before an account is set up for you, Assessments undertaken on ASSET will appear regularly in your ePortfolio account. https://www.asset.rcpch.ac.uk

Within HE KSS, Paediatric Trainees must maintain the NHS ePortfolio as evidence of learning and progression.

ePortfolio is designed with three purposes in mind - as a:
- Learning tool for trainees,
- To assist with educational supervision
- As a central source of information for all those involved in training.
The trainee’s main responsibility is to ensure the ePortfolio is kept up to date, maintain their personal development plan, record their reflections on learning and record their progress through the curriculum. The content of the ePortfolio feeds directly into the Annual Review of Competence Progression (ARCP) and ultimately, the final sign-off of Core Paediatrics Training.

Advantages
It is convenient and easy to use and an easy way to organise and keep track of your training.

Once your account is created you may log in by going to: www.nhseportfolios.org
On the ePortfolio ensure all details on your profile are correct, in particular your email address, postal address and GMC number.

ePortfolio queries are dealt with using the ePortfolio internal messaging system, rather than by email, however you may also email the Paediatrics Workforce Team at: paediatrics@kss.hee.nhs.uk

Organising Your Portfolio

The below guide is not an exhaustive list however we would like to see the following:

**Personal Library** (Your personal library should be structured with folders and any attachments uploaded should be named appropriately):

* Suggested folders:
  CV – updated annually
  Mandatory Courses certificates folder
  Safeguarding and Leadership CBD should be on ASSET but if not please upload to personal library
  Exams folder
  Presentations and publications folder
  Other course/training must include RSM days attended

* Developmental log* (regularly updated, preferably on a weekly basis) Should include:
  Reflective practice/writing
  Current activities, interesting cases, critical incidents
  Important: There should be a clear reflection in the development log if you are involved in any incidents.

**Skills log:**
provide additional evidence to the DOPs which should already be provided.

**PDP:**
Short term PDP - It makes it helpful for the trainee to list a series of things to achieve during the year so they may update this throughout the year. (This list should be agreed with the Educational Supervisor at the beginning of year)
Long term PDP with relevant ambitions – This can be changed as the person matures.

**SLEs (WBAs):**
Include Multi Source Feedback
CBD (Should be signed off with a consultant or a senior (ST7/8) registrar
DOPS (Should be signed off with a consultant or someone who is competent at doing the skills)
MINICEX can be signed off by registrars or consultants.

The Pilot assessments that the RCPCH are running
please refer to college website for all up to date assessments and mandatory DOPs

Audits:

You are encouraged to engage with audits and presentations and upload in a folder in your personal library.

DAPs or QIPS Projects
Assessments, appraisals and examinations

There will be regular appraisals and assessments during your Paediatric training; however progress is dependent on completion of satisfactory assessments. The timing and format of appraisals and assessments will vary for each specialty specific module and will be in accordance with the requirements specified in individual specialty CCT programmes.

Each element requires a large number of assessments and trainees should be strongly encouraged to complete assessments regularly throughout the programme. It is unlikely that it will be possible to complete all required assessments if trainees leave this task until the end of their placement. The assessment system is trainee driven and they should liaise closely with their trainers/educational supervisors regarding progress through the assessments.

Speciality Specific Competencies and Assessments

Trainees will be assessed in the workplace using a range of assessment tools to be completed by different (sometimes multi-professional) assessors. The assessment methods are described below and will be used in different ways by different specialties. The number of forms needed also varies by speciality and deanery. While completing the minimum number of assessment forms is one requirement for a successful outcome from the ARCP, it may be necessary to complete many more assessments in order to show competence throughout the curriculum.

Multi Source Feedback (ePaedMSF) - is a version of the 360 degree assessment. A number of multidisciplinary raters anonymously score a trainee against a number of domains mostly concerned with attitudes and behaviours.

Mini clinical evaluation exercise (mini-CEX) - is a workplace based method where direct observation of trainee’s clinical skills during an everyday clinical encounter is assessed. These skills include medical interviewing ability, communication and clinical judgement and vary depending on the speciality.

Case based discussion (CbD) - is a discussion generally in a reasonably formal setting centred on the trainees reflection on his/her patient notes. The discussion will bring out key messages of trainees knowledge, case management, diagnostic skills and planning etc. A CbD might be included as part of case presentations at department meetings dependent on the speciality.

Directly Observed Procedural Skills (DOPS) - is a clinical encounter evaluating the trainee’s competence in a particular procedure for example Collection of blood from central lines or Umbilical vessel sampling.

SAIL: Sheffield Instrument for Letters - an instrument to review quality of letter writing.

Who can do your assessments of competency?
- Mini-CEX - an experienced higher level trainee or consultant
- CbD - consultant
- DOPS - senior nurse, experienced higher level trainee or consultant
- ePaedMSF (formerly eSPRAT) - a variety of assessors; senior nurse, experienced higher level trainee, consultant, junior nurse, junior trainee, trainee of equivalent training level, administrative staff

It is expected that approximately 50% of each of the assessments will be completed by consultants.
RCPCH assessment roadmap shows the route through training linked to the assessment required at each level: (Ensure you check the website for updated guidance)

**Paediatric Training and Assessment Pathway 2013**

**Level 1 training (ST1-ST3)**  
24 – 36 months  
General Paediatrics based in acute setting

**Required Assessments:**  
MSF: 1 per Training Year  
Mini-CeX: 8 per Training Year  
CbD: 4 per Training Year  
DOPS: 1 satisfactory assessment for a range of procedures  
ARCP: 1 per Training Year  
HAT/ACAT/LEADER

MRCPCH must be gained by the end of Level 1.  
Must have completed APLS course

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**Level 2 training (ST4-ST5)**  
12 – 24 months  
12 months General Paediatrics  
6 months Neonatology  
6 months Community Paediatrics

**Required Assessments:**  
MSF: 1 per Training Year  
Mini-CeX: 6 per Training Year  
CbD: 6 per Training Year  
DOPS: 1 satisfactory assessment for a range of procedures  
DOC/SAIL: 5 Letters per training level  
ARCP: 1 per Training Year  
HAT/ACAT/LEADER

**Level 3 training (ST6-ST8)**  
24 – 36 months  
Can Choose;  
General Paediatrics  
Paediatrics with Specialist Interest Sub Specialty (GRID)

**Required Assessments:**  
MSF: 1 per Training Year  
Mini-CeX: 4 per Training Year  
CbD: 8 per Training Year  
DOPS: 1 satisfactory assessment for a range of procedures  
DOC/SAIL: 5 Letters per Training Level  
START: Completed in Level 3  
ePaedCCF: 1 CCF to be used as an additional tool when required

6 month prior to the completion of ST8 trainees are eligible to apply for CCT/CESR-CP.

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ePortfolio must be kept for each training year. LTFT Trainees should complete assessments pro-rata.
Examinations

MRCPCH examination

The MRCPCH examination is for the Diploma of Membership of the Royal College of Paediatrics and Child Health (RCPCH) and is usually taken during the period of basic specialist training, which normally lasts two to three years.

Following a comprehensive review, the examinations changed in 2013 as follows:

- The launch of a new syllabi
- Part 1a became known as Foundation of Practice
- Part 1b became known as Theory and Science of Practice
- Part 2 became known as Applied Knowledge in Practice
- The Foundation of Practice, Theory and Science of Practice and Applied Knowledge in Practice exams are all written papers
- The three written papers can be taken in any order. All three must be passed before sitting the Clinical examination

In light of these changes, HE KSS requires trainees to have achieved a pass in two out of the three written papers for entry to ST3 training, and the full MRCPCH before entering ST4 training.

Further information is available on the RCPCH website via the following link:

http://www.rcpch.ac.uk/training-examinations-professional-development/assessment-and-examinations/examinations/examinations
Annual Review of Competence Progression (ARCP)

The Annual Review of Competence Progression (ARCP) is a mechanism of recording the review of a trainee’s progression through their training programme.

ARCP is a vital part of the training programme and unless an “outcome one” (i.e. satisfactory completion of training) is attained at the end of each year of training; you will be unable to progress to the next year/ level of specialty training.

Your Annual Review of Competence progression will take place generally towards the end of the training year. You should aim to have your portfolio up to date by the end of June, the panel will then review it prior to the ARCP and meet for an ARCP meeting in July (exact dates to be confirmed via email). Although this is an electronic process, you may be called for interview.

By the time of your ARCP in July, you must have completed the requirements for that year of training. This includes completion of the Annual GMC survey, requesting feedback on posts and educational process.

The ARCP’s are centrally assessed by a panel consisting of Head of School and/or Training Programme Director, Lay Chair, External Representative and Military or Academic Representative where required.

Please note that registering with your specialty college is a Gold Guide requirement: please ensure you have registered before your forthcoming ARCP and speak to your local training programme director / College Tutor if you have any queries.

The following is a list of the ARCP outcomes of which you will receive one:

<table>
<thead>
<tr>
<th>ARCP Outcome</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Achieving progress and competencies at the expected rate.</td>
</tr>
<tr>
<td>2</td>
<td>Development of specific competencies required - additional training time not required.</td>
</tr>
<tr>
<td>3</td>
<td>Inadequate progress by the trainee - additional training time required.</td>
</tr>
<tr>
<td>4</td>
<td>Released from training programme with or without specified competencies Released from academic programme.</td>
</tr>
<tr>
<td>5</td>
<td>Incomplete evidence presented - additional training time may be required.</td>
</tr>
<tr>
<td>6</td>
<td>Gained all required competencies.</td>
</tr>
<tr>
<td>7.1</td>
<td>Satisfactory progress in or completion of the LAT / FTSTA placement.</td>
</tr>
<tr>
<td>7.2</td>
<td>Development of specific competencies required - additional training time not required LAT / FTSTA placement.</td>
</tr>
<tr>
<td>7.3</td>
<td>Inadequate progress by the trainee - additional training time required LAT / FTSTA placement.</td>
</tr>
<tr>
<td>7.4</td>
<td>Incomplete evidence presented - LAT / FTSTA placement.</td>
</tr>
<tr>
<td>8</td>
<td>Out of programme experience for approved clinical experience, research or career break.</td>
</tr>
<tr>
<td>9</td>
<td>Top-up training (outcome indicated in one of the above areas).</td>
</tr>
</tbody>
</table>
ARCP Advice

- Don’t leave your assessments to the last minute!
- Ensure your portfolio and CV are regularly kept up-to-date. See appendix C for helpful hints on where to store your evidence on ePortfolio
- Talk to your Educational Supervisor EARLY if you are having difficulties
- Keep the School informed of any changes in contact details
- If your attendance is required at your ARCP, confirm your ability to attend as soon as possible
- It is your responsibility to know what will be assessed
- If you don’t provide evidence by the ARCP date, you cannot be issued with a Satisfactory Outcome, without exception.
- If you don’t provide an updated Form R you will be issued with an outcome 5

Trainee Review Meetings (Interim Reviews)

The ‘Trainee Review Meetings' will be a formal discussion for trainees with the Training Programme Director's and the College Tutors. This will give trainees the opportunity to discuss their training to date, progression, career aspirations and any questions they may have with regards to these areas.
Revalidation

Revalidation is the General Medical Council’s new way of regulating licensed doctors to give extra confidence to patients that their doctors are up to date and fit to practice.

Licensed doctors including doctors in foundation year two and specialty training will have to revalidate, usually every five years. In addition, for doctors in postgraduate training, you will also revalidate when you receive your Certificate of Completion of Training (CCT).

We expect the vast majority of trainees to revalidate without any problems, as they are already closely supervised. The process for Revalidation for trainees is aimed at ensuring that employers and educational and clinical supervisors have a process to share information when needed, so that trainees can be best supported in their revalidation process.

The GMC has agreed that the ARCP process will be used as the vehicle by which doctors in training will revalidate and there is some new and amended paperwork to ensure all the areas required for revalidation are covered in ARCP. As part of the revalidation process you will be sent an enhanced form R which you will need to complete and sign by the time of your ARCP. This paperwork will contribute to your ARCP final outcome.

HE KSS is committed to enabling its doctors in postgraduate training to revalidate by providing as much information and support as possible and will provide you with regular updates.

For further information on revalidation please visit the HE KSS website: http://kss.hee.nhs.uk/education-and-training/specialty-school-and-secondary-care2/specialty-support-welcome-page/revalidation/
Regional Training Days (RTD)
2015-16 Regional Training Days for Paediatric Trainees

PLEAT Programme (Paediatrics Learning Education and Training Programme)

The HE KSS School of Paediatrics has planned an education and training programme for all ST1-ST6 trainees within Health Education Kent, Surrey and Sussex.

**ST1 to ST3** trainees are expected to attend a minimum of 12 PLEAT days over a 3 year cycle (attendance should be spread over the 3 years and not left until the ST3 year).

**ST4 to ST5** trainees are expected to attend a minimum of 5 Senior PLEAT or RSM days over a 2 year period (Level 2).

**ST6** trainees are expected to attend a minimum of 1 Senior PLEAT or RSM day during their ST6 year.

PLEAT days will be beneficial to education and learning which will be based on the curriculum. All training days will cover the curriculum and additional topics, teaching etc.


**Simulation Training Days**

All trainees within the HE KSS training programme will be expected to attend at least 1 simulation day per year. These will be at 4 Centre’s across HE KSS, Ashford & St. Peter’s (St Peter’s), Brighton, Medway, and Western Sussex (Worthing), it is expected that doctors from all grades across the training programme will attend.

There will be scenarios and role playing exercises and each centre will have a simulation lead. It is also expected that there will be some standardisation of the scenarios, so that there will be no obvious difference in the quality of training at different sites, as they will all be using the latest up to date mannequins and equipment.

Role playing and simulation has been shown to be very useful in preparing doctors for difficult, challenging or life threatening scenarios, but yet in an atmosphere of safety. It is expected that these simulation days will go well beyond that of basic resuscitation that is provided on the NLS and APLS/EPLS courses.
Trainee Representatives and their roles

The Trainee Representatives are elected or chosen and work with the LFG, LAB and Specialty School. They are there to ensure views, opinions and experiences of trainee doctors are taken into account at every level of decision-making. They may also work with Medical Education Managers, Academic Registrar, Doctors’ Liaison Officer or Trust Education Advisor.

The various trainee representatives' responsibilities are:

- Attends the open section of the Specialty Training Committee (STC) meeting.
- Represents the views and interests of all trainees including those who may not be specialty specific i.e. Foundation or GP trainees training in specialty posts.
- Provides feedback to the trainees on developments in varying processes.
- Canvasses colleagues for opinions on issues relating to specialty training within a unit or across the region.
- Disseminate good aspects of training.
- Attends training committees.
- Attends Local Faculty Group Meetings within the Trust.

Trainee representative’s skills:

- Time management
- Presentation and communication
- Networking
- Self-confidence and assertiveness
- Leadership and diplomacy
- Organisational and administrative
- Initiative, motivation, responsibility
- Commitment to activity outside your programme of study
- Potential managerial skills

All new trainees who are representatives at STC level will be invited to participate in a training session and will become a member of the HE KSS Trainee Forum, which has been set up to bring trainees together to raise issues and share good practice from across region and different specialties. This forum is chaired by our lead trainee representatives who pull together all the issues raised by the trainee representatives and ensure that they are raised at the highest level within HE KSS.

HE KSS actively promotes the trainee voice at every opportunity.
The Support network available to you - Support services for HE KSS trainees

HE KSS is committed to ensuring the welfare of its trainees, and wants to ensure that all trainees studying with HE KSS have the best possible chance of success during their training.

We at HE KSS maintain and run a number of programmes and services which aim to ensure trainees are supported at all stages:

- Less Than Full-Time Training
- Parental Leave
- Deferring the start of specialty training
- Study leave
- Support for trainees in difficulty
- Inter-Deanery transfers

For further information please see HE KSS website: http://kss.hee.nhs.uk/specialty/support/

There are a number of people who are able to provide support to you whether it is pastoral or career advice:

- Educational supervisor
- Clinical supervisor
- College Tutor
- Head of School
- Training Programme Director
- Specialty Workforce team
- Trainee Representative(s)

Trainee Support

HE KSS is committed to supporting doctors in training who are in difficulty or need some extra support. Aside from this ALL trainees are monitored for satisfactory progress, not just those experiencing difficulties.

Please see full guidance available online: http://kss.hee.nhs.uk/education-and-training/trainee-support/

If you have concerns about your own progress get in touch early, don’t wait! Talk to:

- Educational Supervisor (in the first instance), or
- Clinical Tutor
- HE KSS School Team

Doctors who may need additional help are discussed by the Training Support Group to ensure all routes of support are explored.

If your ability to progress is at risk, your Head of School and the Training Support Group will be kept informed of your progress. They are able to offer additional support if required.
Should you need support due to an exam failure, HE KSS will endeavour to provide you with additional training time. You do however need to demonstrate that you have attempted the exam and have been proactive in your training throughout the year.

Trainees will always be fully informed and involved at all stages of support. The aim of additional support is to get you ‘back on track’ and for training to continue successfully.

**Mentoring**

We believe the huge potential of HE KSS Specialty Schools’ network lies in its trainees and the benefits they could get from interacting with each other during the mentoring programme.

The purpose of the Peer to Peer Mentoring Programme is to unleash this positive energy by linking up Mentors and Mentees who share similar professional interests and could help each other get the best out of themselves. This will not happen in a set way, and each mentoring relationship will be unique. We believe that each Mentor and Mentee pairing should, with support from HE KSS Specialty Schools, set their objectives and agree what they want to get out of the relationship. Mentors should facilitate a process of self-reflection and help Mentees understand their professional ambition and the steps they need to take to achieve their aspirations.

The Mentoring Programme is designed to become an integral part of the culture in HE KSS Specialty Schools to help Junior and Senior Trainees to realise their potential. It is intended to enhance the personal and professional development of Specialty Trainees, their well-being and their working relationships. It will also be valuable in helping mentees with relationships in the workplace, reflection on criticism in the workplace, discussing any feelings about undermining and bullying.

Further details can be found at: [http://kss.hee.nhs.uk/specialty/support/peermentoring/](http://kss.hee.nhs.uk/specialty/support/peermentoring/)
HE KSS Key Policies and Documents

Additional generic information can also be found on the HE KSS website:

The Gold Guide

The 2010 Gold Guide replaces all previous versions and is relevant for the length of your training.

The Gold Guide provides overarching guidance and standards as to the arrangements for Specialty Training in the UK.

Refer to the Gold Guide together with HE KSS guidance for standards relating to:
- The role of statutory bodies
- Supervision
- LAT and LAS
- Less Than Full Time Training, Maternity Leave, OOP
- Deferral
- Appraisal, assessment and annual planning

Relocation Expenses

From 1 April 2009, the London Deanery is responsible for processing all relocation Expense Claims (covering removal and excess travel expenses) for all London and HE KSS based trainees on a recognised training Programme.

The Deanery’s objective will be the timely reimbursement of a trainee’s verified entitlement to expense. However, before incurring any expenses for which you anticipate submitting a claim to the Deanery, please complete a relocation eligibility form and return by post for authorisation, without which a claim will not be processed. You can find this form on the London Deanery website:

http://www.lpmde.ac.uk/training-programme/training-matters/relocation-and-excess-travel-claims/relocation

Completed forms should be returned by post (emails will not be accepted) to:

The Relocation Department
London Deanery Shared Services
Stewart House
32 Russell Square
London
WC1B 5DN
Flexible Training

Less than Full Time (LTFT) Training in the Health Education Kent, Surrey and Sussex area allows doctors and dentists to work less than full-time in posts that are fully recognised for training. HE KSS supports access to Less than Full Time Training through slot sharing and, if this is not feasible, trainees may need to train on the basis of reduced sessions in a full time placement.

The intention of flexible training is to keep doctors in training where full-time training is not practical for well-founded individual reasons. LTFT training supports doctors who wish to train part-time, while remaining as close as possible to the arrangements for doctors working full-time.

Further information on flexible training can be found at the following site: https://kss.hee.nhs.uk/specialty/support/ltft/

Inter - Deanery Transfers

If you are a trainee within the HE KSS area and wish to be considered for an inter-deanery transfer to another Deanery then you would need to apply through the new national inter-deanery transfer central application system that is managed by London Deanery. The purpose of the inter-deanery transfer process is to support trainees who have had a significant unforeseen change in circumstances since their appointment to training, enabling consideration to be given to a possible transfer to another deanery.

Further information can be found at: http://www.londondeanery.ac.uk/var/idt

Time out of Training

Absence from training, and its effects on CCT dates, has always been monitored by ARCP panels; a recent statement from the GMC has sought to bring all speciality training programmes into line with the amount of time out of training that can be “counted” towards training. This approach will also enable ARCP panels to make a reasoned assessment of progression and ensure that any support that may be required by the doctor is put in place.

The GMC have stated that any absence of 14 days or over in any 12 month period must trigger a CCT date review. This does not mean that your CCT date will automatically be extended, however it does mean that a conversation about the effect that your time out of training has had will likely take place during your ARCP/RITA.

The GMC statement covers all absence from programme other than annual leave, study leave, or prospectively approved OOP (T). All forms of statutory leave are covered including sick leave, maternity/paternity/adoption leave, carers leave, and jury service. Doctors in training will be asked to declare the number of day’s absence they have had in the previous year at their ARCP/RITA by completing an ‘absence declaration form’. This will then be reviewed by the ARCP panel, and a decision made as to any extension is required.
Out of Programme Policy and overview

This guidance covers all Specialty Trainees in the HE KSS Schools with the exception of GP, and offers direction for all Specialty Schools and Trainees. This document indicates the HE KSS Schools preferred methodology for implementing the Gold Guide ‘Out of Programme (OOP)’ guidance. The Guidance can be found online at http://kss.hee.nhs.uk/policies-and-procedures/out-of-programme/

A Trainee may take time out of their programme to undertake a period of research, gain clinical experience or other appropriate training that is or is not available within HE KSS. Out of Programme placements are designed to accommodate this and can take place either in the UK or abroad.

All OOP requests need to be agreed by the Postgraduate Dean, so trainees are advised to discuss their proposals as early as possible. It is normally expected that a trainee would have completed one year of training before submitting an application given the short period and nature of the training. All applications for OOP that trainees wish to have contributed towards the award of their CCT/CESR (CP) must be prospectively approved by the GMC before they start in order for it to be approved for contribution.

Types of OOP

There are four types of OOP which may be considered:

- **OOPT – Out of Programme for Approved Clinical Training**
  This is where a trainee is undertaking GMC prospectively approved clinical training which is not part of the trainee’s specialty training programme. The time will contribute towards the award of a CCT/CESR (CP)

- **OOPE – Out of Programme for Clinical Experience**
  Where a trainee is gaining clinical experience which is not approved by GMC but which may benefit the doctor or help support the health needs of other countries. This will not normally contribute to the award of a CCT/CESR (CP).

- **OOPR – Out of Programme for Research**
  Where a trainee is undertaking a period of research, this may/may not contribute towards the award of a CCT/CESR (CP) depending on the content of the programme.

- **OOPC – Out of Programme for Career Break**
  Where a trainee is taking a planned career break from the specialty training programme. This will not contribute towards the award of CCT/CESR (CP).

Notice

Trainees should give their Postgraduate Dean as well as current and next employers a minimum of six months’ notice, but preferably as much as possible. This is to ensure that service issues and the needs of patients can be properly addressed. In exceptional circumstances notice of three months may be acceptable.

Study Leave Guidance

Please find below some information on your study leave guidance. Please note HE KSS currently has one of the most generous study leave allowances nationally

- Entitled to up to a maximum of 30 days in a year (which is calculated from the date of commencement of appointment or rotation)
- Leave to sit necessary examinations is allowable but does not count against the entitlement of study leave
- Trainees in locum specialty posts, those in FTSTAs and LATs exceeding three months are entitled to study leave pro rata
- There is no entitlement to study leave for LAS appointments

Using your study leave:
- Approval rests with your Local Trust
- Ensure that you follow local Trust policy to make an application for study leave. Applications should usually be received on the appropriate form at least 6 weeks prior to the date of the leave
- Leave should not be taken within the first two weeks of a new appointment
- You must have an agreed personal development plan before applying for Study Leave

**Study Leave Budget Information**

Study leave amount is £860, which can be accessed locally within your Trust.

Deanery guidance is available online: [http://kss.hee.nhs.uk/policies-and-procedures/study-leave-guidance/](http://kss.hee.nhs.uk/policies-and-procedures/study-leave-guidance/)

*Please note that HE KSS managed ST6 trainees who are in a London Deanery post will not be topsliced so will be required to pay from their study leave budget for attendance at PLEAT & Simulation Days*

Topsliced Study Leave is used by your specialty school to deliver centrally run training days that you are required to attend.

**Maternity/ Parent Leave**

Each Trust will have a Maternity Policy which **must** be referred to and read in conjunction with the HE KSS Deanery document. Please email the school if you wish to have a copy of this document

**Blood Borne Virus (BBV)**

There is a requirement for a Trainee to report via Occupational Health-OH at the outset of employment, matters relating to certain BBVs.

This is a Potential Patient Safety issue and the Trainee may also require specific adjustments to be made to their working practices.

For further details contact your employing Trusts OH Department

**Taking Consent**

**Patient Safety and Informed Choice.**

- Follow best guidance in consent summarised by DH and GMC.
• Familiarise yourself with local guidance and consent paperwork at the outset of your post.
• Consult with your Educational and Clinical Supervisor for queries relating to consent.

**Careers Support at HE KSS**

Who to contact:
- Joan Reid – Head of Careers
- Lisa Stone – Senior Careers Adviser
- Margaret Holbrough – Careers Adviser
- Kathleen Sullivan – Teaching Fellow

What the Careers team do:
- Careers – 3 tiers of support
- Referrals – trainee in difficulty guide
- 4 stage model – career planning
- Faculty development – career support workshops and PG cert Managing Medical Careers
- Information evenings and support career fairs
- ROADS – career planning book
- HE KSS careers website
- Medical careers website – www.medicalcareers.nhs.uk
- Other guides e.g. to accompany Peninsula/AGCAS DVD

www.medicalcareers.nhs.uk

**Library and Knowledge Services**

Library and Knowledge services form part of the HE KSS known as LKSDT. They manage a collaborative network of NHS libraries, offering a variety of services that support evidence-based practice, and the skills to use them. [http://kss.hee.nhs.uk/education-and-training/library-and-knowledge-services/](http://kss.hee.nhs.uk/education-and-training/library-and-knowledge-services/)

You Can
- Search a wide range of regional resources, including:
  - Books
  - Journals
  - Local and linked libraries
- Sign up for an Athens account and gain access to:
  - Databases
  - eBooks
  - Specialist Libraries
  - Current awareness services

**Getting Access**

Step 1: Join your local Library & Knowledge Service
  - search at [www.hlisd.org](http://www.hlisd.org)

Step 2: Search for national, regional and local resources via the catalogue at:
  - [www.southeastlibrarysearch.nhs.uk](http://www.southeastlibrarysearch.nhs.uk)

Step 3: Sign up for an NHS Athens account to access a wide variety of electronic resources. Apply at:
  - [https://register.athensams.net/nhs/nhseng](https://register.athensams.net/nhs/nhseng)

Step 4: Search for national, regional and local electronic content at NICE Evidence Services:
Quality Management
HE KSS is committed to improving and maintaining the quality of its training. There are a number of mechanisms to monitor this quality and trainees are required to participate in this process. Each trainee is required to complete and return the annual GMC trainee survey. In addition there will be Specialty School specific surveys about training posts that trainees will be required to complete.

Any unresolved issues or on-going difficulty, whether in relation to training or other matters which have not been solved locally, should in the first instance be raised with the Training Programme Director. If the trainee wishes to discuss the matter further, he/she should contact the Chair of the Specialty Training Committee, and if necessary, the Head of the School.

Local Faculty Groups, Local Academic Boards and Local Educational Provider Visits

Local Faculty Groups (LFG)
- Established and maintained by Local Education Providers (LEPs)
- One for each specialty within the LEP
- Responsible for ensuring LEPs deliver high quality postgraduate medical education
- Ensure systems are developed, implemented and evaluated.
- Must comply with
  - the approved curriculum of the appropriate Royal College or Faculty
  - the GMC’s ‘Good Medical Practice,’
  - Relevant GMC publications
  - the NHSLA Risk Management Standards for Acute Trusts, CQC, Primary Care Trusts and Independent Sector Providers of NHS Care.

Local Academic Board (LAB)
- Meets in each Local Education Provider (LEP), established by HE KSS
- Receive information from Local Faculty Groups (LFGs)
- Fulfil the educational governance function
- Monitor and oversee the quality of training
- Centralised conduit of communication
- Meet 3 times a year
- Review and consider reports from LFGs
- May initiate LEP internal review of programmes
- Host and manage visits to LEPs
- Detailed remit is contained in GEAR

Local Educational Provider Visits (LEP)
- All core and selected higher specialties are visited in each LEP
- There is a 3 to 5 year cycle of visits
- HE KSS forms the visiting team with an external visitor on the panel
- In line with the GMC framework for quality assurance of training
- Areas of concern or good practice are noted and reported
- Reports are delivered by the LFG and LAB to the HE KSS Quality Management Steering Group for consideration.
- Reports feed into Annual Specialty Reports
Useful Web Links

HE KSS Paediatrics Website
http://kss.hee.nhs.uk/education-and-training/specialty/paeds/

ARCP Information and Guidelines
http://kss.hee.nhs.uk/education-and-training/specialty/paeds/paeds-arcpir/

Form R

ePortfolio
https://www.nhseportfolios.org

Inter Deanery Transfer
http://www.londondeanery.ac.uk/var/idt

Royal College
http://www.rcpch.ac.uk/home

Relocation Expenses
http://www.londondeanery.ac.uk/var/relocation

Curriculum
http://www.rcpch.ac.uk/home

HE KSS Regional Training Day Schedule

Gold Guide
GMC List of domains and standards

Domain 1. Patient safety

The duties, working hours and supervision of trainees must be consistent with the delivery of high quality safe patient care.

Standard: The duties, working hours and supervision of trainees must be consistent with the delivery of high quality safe patient care.

Domain 2. Quality Assurance, Review and Evaluation

Postgraduate training must be quality controlled locally by deaneries, working with others as appropriate e.g. medical Royal Colleges/Faculties, specialty associations, training deliverers.

Standard: Postgraduate training must be quality controlled locally by deaneries, working with others as appropriate, but within an overall delivery system for postgraduate medical education for which Deans are responsible.

Domain 3. Equality, Diversity and Opportunity

Postgraduate training must be fair and based on principles of equality.

Standard: Postgraduate training must be fair and based on principles of equality.

Domain 4. Recruitment, selection and appointment

Processes for recruitment, selection and appointment must be open, fair, and effective and those appointed must be inducted appropriately into training.

Standard: Processes for recruitment, selection and appointment must be open, fair, and effective.

Domain 5. Delivery of curriculum including assessment

The requirements set out in the curriculum must be delivered.

Standard: The requirements set out in the curriculum must be delivered and assessed.

Domain 6. Support and development of trainees, trainers and local faculty

Trainees must be supported to acquire the necessary skills and experience through induction, effective educational supervision, an appropriate workload and time to learn.

Standard: Trainees must be supported to acquire the necessary skills and experience through induction, effective educational supervision, an appropriate workload, personal support and time to learn.

Domain 7. Management of Education and Training

Education and training must be planned and maintained through transparent processes which show who is responsible at each stage.

Standard: Education and training must be planned and maintained through transparent processes which show who is responsible at each stage.
**Domain 8. Educational resources and capacity**

The educational facilities, infrastructure and leadership must be adequate to deliver the curriculum.

Standard: The educational facilities, infrastructure and leadership must be adequate to deliver the curriculum.

**Domain 9. Outcomes**

The impact of the standards must be tracked against trainee outcomes and clear linkages should be reflected in developing standards.

Standard: The impact of the standards must be tracked against trainee outcomes and clear linkages should be reflected in developing standards.
ePortfolio Helpful hints: where to store evidence

As the e-Portfolio increases in complexity, trainees have been asking for more clarification about how educational events and activities should be recorded. In addition, the ARCP process now relies exclusively on the ePortfolio; and trainees are ranked on their ePortfolio in order to arrange job allocations. The following advice is a guide to trainees, however there are many different ways of using e-Portfolio which are equally valid; so long as ARCP-required items are clearly located and logically placed!

1. Procedures: Trainees are advised to record out-of-the-ordinary procedures (especially those you do not get DOPs done for) e.g. LPs, long lines, intubations and unsupervised procedures at night. You do not have to record routine procedures e.g. venepuncture but it is worth recording particularly tricky cannulations etc. For senior trainees, start to record procedures you are teaching/supervising if possible. Record in SKILLS LOG.

2. Courses and training days: E.g. APLS/NLS/PLEAT/RSM day's etc. Place under COURSES. Upload certificates to personal LIBRARY in folder called CERTIFICATES.

3. CV: Add entry to GOVERNANCE titled “CV” & link to CV in personal LIBRARY. Worth creating a CV folder and include year in filename, or remember to replace the CV file each year!

4. Exam passes: Add objective to PDP e.g. “pass all three RCPCH Written paper exams” and mark as completed once done.

5. Audit or guidelines: Add to GOVERNANCE section & link & upload audit presentation/report into personal LIBRARY in a folder marked AUDITS for example. Optional - can link to curriculum for the topic covered.

6. Presentations within the department: Add to PRESENTATION section for journal club discussions etc. & upload presentations or hand-outs to personal LIBRARY in folder marked PRESENTATIONS or similar. Alternatively if presentation was to teach colleagues/students, add to TEACHING section. Important to upload & link any feedback forms from your presentations or include comments received in reflective comments area. Optional link to curriculum for that topic.

7. Record of teaching sessions attended: e.g. consultant led teaching/grand rounds etc. add these to the EDUCATION/CPD section (so that they are distinct from teaching sessions in which trainees have taught others). Link to the relevant curriculum item useful.

8. Patient letters of thanks: Add to GOVERNANCE and uploaded to the library.

9. SAIL assessments: One suggestion; add CLINIC entry to development log & link to the uploaded anonymised letter & SAIL form into personal library in a specific "CLINIC LETTERS & SAIL" folder. Remember; delete/ remove the patient name/details from the letter beforehand.

10. LEADER assessment: Add to MANAGEMENT section and link to & upload form into personal LIBRARY in folder marked MANAGEMENT or similar

11. Reflective event/critical incident: Add to that section on the PDP. Aim for a couple in each 6 months placement. Link to relevant curriculum item occasionally useful. They can be done on anything that made you think e.g. complex cases on nightshifts/interesting families from clinic; think of communication type scenarios (e.g. a difficult parent/difficult colleague/ breaking bad news) as well as on resuscitation events and critically ill children.

12. Clinics attended: In developmental log under CLINICS! Link to relevant curriculum item useful.

13. Clinical Questions: Add to CLINICAL QUESTIONS on developmental log. Aim for at least 1 per 6 months. Topics; anything you had to go away & research/look up; or when there was a debate regarding the correct management for example. Link to relevant curriculum item useful.

14. Child protection: Into SAFEGUARDING on the developmental log. This could include;
• Interesting cases you have seen when on-call
• Departmental Child Protection or safeguarding meetings you have attended
• Case conferences etc
• Formal Child Protection courses
• E-learning modules for Child Protection: upload and link to the module completion certificates in the personal LIBRARY. On the E-Learning for Health modules (free to access) you can download an electronic progress summary to prove which parts of a module you have completed.

15. Publications and papers etc.: Add to RESEARCH section and upload.

16. Interesting cases: Add to MISC /reflective event sections & link to relevant curriculum items

17. External meetings: e.g. deanery /RCPCH/ trainee rep for example – add to MANAGEMENT

18. Management activities: Record activities such as organising the rota or teaching timetable under MANAGEMENT. Other management type activities could include;
• Re-organising clinical areas to increase efficiency e.g. re-organising cannulation equipment so it’s all in one place or creating “Cannulation Kits” for example.
• Managing teams/people: managing a difficult colleague or patient complaint.
• Improving clinical processes e.g. changing handover processes or developing clerking pro-formas or updating existing forms within the department
• Helping organise induction, writing induction handbooks etc.
• Audit of a management/services topic e.g. clinic waiting lists or an audit related to a patient safety issue.
• Projects with clinical coding departments, improving coding accuracy on discharge summaries for example.
• Attending trust management meetings etc.