

Health Education England

LNR and Trent Foundation Schools, F2 Sign Off: 2022 Entrants ARCP Panel Checklist

| Foundation Doctor Name: Hospital Name: | Evidence (Y/N) | If not, what evidence is missing? | 2 nd ARCP (if required) Evidence (Y/N) |
|---|-------------------|---|--|
| MANDATED FOR SIGN OFF | | | |
| Full registration and a licence to practise with the GMC To undertake the second year of the Foundation Programme doctors must be fully registered with the GMC and hold a licence to practise | | | |
| Completion of 12 months F2 Training. The maximum permitted absence from training, not including annual leave, during the F2 year is 20 working days | | | |
| Satisfactory educational supervisor's end of year report The report should draw upon all required evidence listed below. If the F2 doctor has not satisfactorily completed one placement but has been making good progress in other respects, it may still be appropriate to confirm that the F2 doctor has met the requirements for completion of F2. The last end of placement review must be satisfactory. | | | |
| Educational supervisor's end of placement reports* Required for the first and second rotations only. For 6 month Academic rotations please adjust accordingly. | | | |
| Clinical supervisor's end of placement reports Required for all rotations and at least one must use PSG feedback. Final CSR must be satisfactory. | | | |
| Team Assessment of Behaviour (TAB) Minimum of one satisfactory TAB per year | | | |
| Valid Placement Supervision Group report (PSG) Minimum of one valid PSG per year (recommended in 1st placement). | | | |
| Completion of all FP curriculum outcomes The Foundation Doctor should provide evidence that they have met the 13 foundation professional capabilities recorded in the e-portfolio. Evidence to satisfy FPC1-5 must include direct observation in the form of SLEs and the specific life support capabilities specified in FPC2. This will be shown on HORUS as: <ul style="list-style-type: none"> • Report of FPCs with evidence mapped • Curriculum progress ratings by ES for all 3 HLOs • FPC9 evidence of participation in quality improvement | | | |
| An acceptable attendance record at generic foundation teaching sessions Minimum of 60 hours (during 12 months pro-rata) of teaching. At least 30 hours must be core learning. | | | |

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| Summary narrative One summary narrative for each of the 3 HLOs should be started in your first placement, updated throughout your training year and signed off by your ES at the end of year review. | | | |
| Contemporaneously developed portfolio Confirmation is required that the portfolio was kept up to date throughout the training year. | | | |
| Engagement with feedback on training programme Examples include evidence of engagement with the NETS and NTS surveys. | | | |
| RECOMMENDED TRAINING * | | | |
| A valid Advanced Life Support (or equivalent) certificate In order to meet the specific life support capabilities, ALS or equivalent is provided by employing Trusts. | | | |
| Evidence of completion of Safeguarding level 2 training This can be Trust training or e-Learning for healthcare | | | |
| Completion of the Foundation School F2 recommended training below will provide evidence towards the FPCs as outlined in the 'specific areas of core learning' on the Curriculum: <ul style="list-style-type: none"> • F2 Acute Simulation training day (FPC2) • e-Learning Modules: <ul style="list-style-type: none"> ○ Consent (FPC4) ○ Psychiatry (FPC1-5) | | | |
| Completed an F1 or F2 placement in a Psychiatry role, <u>or</u> completed the Psychiatry Simulation training day (ie if the doctor has had a Psychiatry placement they do not need to attend the training course) | | | |
| *Where the doctor has not completed the training detailed above, the ES must be satisfied that the learning required in the curriculum has been achieved by other methods. | | | |

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| MANDATORY DECLARATIONS | | | |
| Signed probity and health declarations on the e-Portfolio system | | | |
| ARCP Panel satisfied there are no outstanding probity concerns | | | |
| Signed Form R on the e-Portfolio system | | | |

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|------------------------------------|--|------|--|
| 1st ARCP OUTCOME | | | |
| ARCP Chair Signature | | Date | |
| ARCP Chair Name (PLEASE PRINT) | | | |

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|--|--|------|--|
| 2nd ARCP OUTCOME (if required) | | | |
| ARCP Chair Signature | | Date | |
| ARCP Chair Name (PLEASE PRINT) | | | |