

LIFELONG LEARNING PORTFOLIO

PHOEBE D'ORTON-GIBSON (ACCS CT3 ANAESTHETICS)

THE AIM IS TO PASS ARCP AND SET YOURSELF UP WELL FOR THE YEARS TO COME

LIFELONG LEARNING PORTFOLIO IS NOT DESIGNED FOR ACCS (PARTICULARLY IN YEAR 1) SO HERE ARE A FEW POINTERS/THINGS THAT I WISH I HAD KNOWN

LIFELONG LEARNING PORTFOLIO IS ONLY IN IT'S 3RD YEAR OF USE SO THERE ARE STILL SOME TEETHING PROBLEMS

A COPY OF THIS DOCUMENT IS AVAILABLE ONLINE (26 PAGES BUT SHORTER THAN THE >100 PAGES ONE FROM THE COLLEGE)

DO READ IT EARLY ON AND THEN CARRY IT AROUND WITH YOU/REFER TO IT OFTEN TO HELP YOU REMEMBER WHAT YOU STILL NEED TO GET SIGNED OFF

Health Education England North West Guidance for ARCP Requirements for ACCS Trainees in CT1/ST1 and CT2/ST2

*****AUGUST 2018: Please note that some details in this document relevant to ACCS-Anaes Trainees will change once the Lifelong Learning ePortfolio is up and running fully*****

Taken from ACCS Core Training Programme Curriculum and Assessment System, April 2012 (<https://www.rcoa.ac.uk/system/files/TRG-CU-ACCS2012.pdf>)

ACCS is a three year programme consisting of:

- Six months Emergency Medicine
- Six months Acute Medicine
- One year of Anaesthetics and ICM (recommended to be six months in each specialty)

HOW DO I PASS ARCP?

YOU NEED TO HAVE COMPLETED THE 3 PAPER CHECKLISTS CONTAINED WITHIN THOSE DOCUMENTS (THIS WILL INCLUDES A VARIETY OF ASSESSMENTS INCLUDING SAFE-GUARDING, AUDIT, WBPAS).

YOUR EDUCATIONAL SUPERVISOR WILL CHECK YOUR PORTFOLIO THOROUGHLY TO MAKE SURE YOU HAVE MET THE REQUIREMENTS.

HOW TO PASS ARCP PART 2

- 2X “EDUCATIONAL SUPERVISOR’S STRUCTURED REPORT” FORMS - 1 EACH FOR EMERGENCY MEDICINE AND ACUTE MEDICINE

THESE FORMS LIST THE CORE PRESENTATIONS (SOME MUST BE DONE BY A CONSULTANT AND MUST BE DONE ON A+E FOR INSTANCE). THEY ALSO HAVE A BLANK SPACE FOR YOUR SUPERVISOR TO COMPLETE TO SAY THAT THEY HAVE LOOKED AT YOUR REFLECTIONS ETC. THESE NEED TO BE PRINTED OFF, FILLED IN AT THE END OF THE PLACEMENT AND THEN ATTACHED AS A DOCUMENT TO YOUR PORTFOLIO.

- 1X “HEE NW ACCS ARCP CHECKLIST ST1/CT1”

A BIT OF REPETITION HERE THAT ALSO SPECIFIES THE MINIMUM NUMBER OF PRESENTATIONS AND DOPS THAT NEED TO BE SIGNED OFF

- 2 X COMMON COMPETENCIES CHECKLIST

THESE ARE A LIST OF COMPETENCIES THAT THEY WANT YOU TO GAIN BY ST7. THIS IS PART OF THE A+E CURRICULUM BUT LESS RELEVANT FOR ANAESTHETICS. YOU’LL STILL NEED TO HAVE THIS COMPLETED FOR EACH ROTATION

OTHER PORTFOLIO REQUIREMENTS:

- PERSONAL DEVELOPMENT PLAN - FILL THIS IN AT THE BEGINNING OF EACH ROTATION
- CORE PRESENTATIONS - MOST NEED TO BE COMPLETED AS WORKPLACE BASED ASSESSMENTS (COMBINATION OF CBD/CEX) THOUGH SOME CAN BE DONE AS E-LEARNING OR COVERED VIA ACCS TEACHING
- REFLECTIONS & "PERSONAL ACTIVITIES" - AS ABOVE TO COMPLEMENT ANY CORE PRESENTATIONS COVERED IN THIS WAY
- DOPS - VARIOUS PRACTICAL SKILLS THAT MAY LEND THEMSELVES TO A PARTICULAR ROTATION
- SUPERVISOR MEETINGS - TRY TO HAVE THESE AT THE START/MIDDLE/END OF PLACEMENTS (THESE HAVE TO INITIATED BY YOU FROM YOUR PORTFOLIO)
- MSF/TAB - NEED ONE FOR EACH JOB, TRY AND START DECEMBER/MAY
- AUDIT/QI INVOLVEMENT/ EXTRA QUALIFICATIONS - UPLOAD SOME EVIDENCE IN TIME FOR ARCP

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Logbook

Case

[Anaesthetic](#)

[Intensive Care Medicine](#)

[Acute Pain](#)

[Chronic Pain](#)

[Procedure \(Stand-alone\)](#)

[Session](#)

Review Logbook

New Entry

[Workplace Based Assessment](#)

[Personal Activity](#)

[Personal Reflection](#)

Development

[Personal Development Plan](#)

[Milestones and Certificates](#)

[Multi-source Feedback](#)

[ESSR Records](#)

[ARCP Outcomes](#)

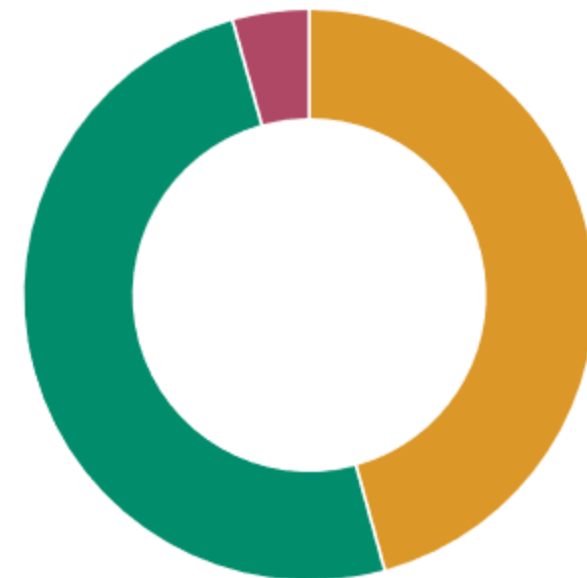
[Document Store](#)

Progress Stage: Core

 [In progress: 11](#)

 [Completed: 12](#)

 [Not started: 1](#)



Get Started

This is where you add your
CBD, DOPS, CEX, ACAT and
Reflections to evidence the
Core Presentations

This is where you review
your progress against
the curriculum

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- [Chronic Pain](#)

[Procedure \(Stand-alone\)](#)

[Session](#)

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New Entry

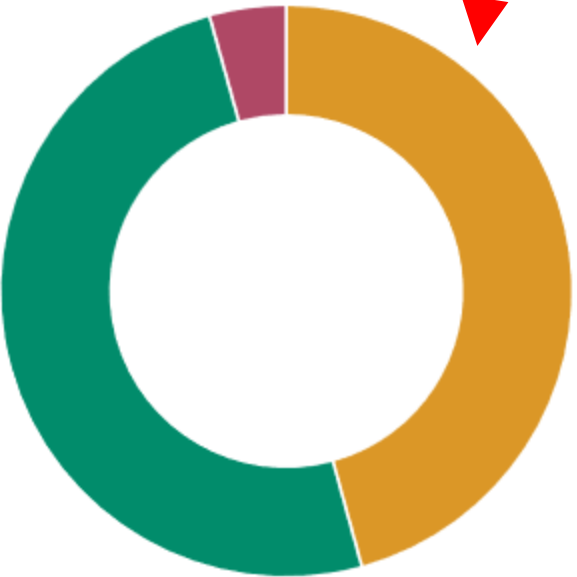
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- [Personal Activity](#)
- [Personal Reflection](#)

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- [Multi-source Feedback](#)
- [ESSR Records](#)
- [ARCP Outcomes](#)
- [Document Store](#)

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Review Curriculum

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This is where you add your PDP, extra qualifications (e.g .ALS certificate, MSF/TAB and audit/QI evidence

Logbook

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[Acute Pain](#)

[Chronic Pain](#)

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[Session](#)

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New Entry

[Workplace Based Assessment](#)

[Personal Activity](#)

[Personal Reflection](#)

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[Multi-source Feedback](#)

[ESSR Records](#)

[ARCP Outcomes](#)

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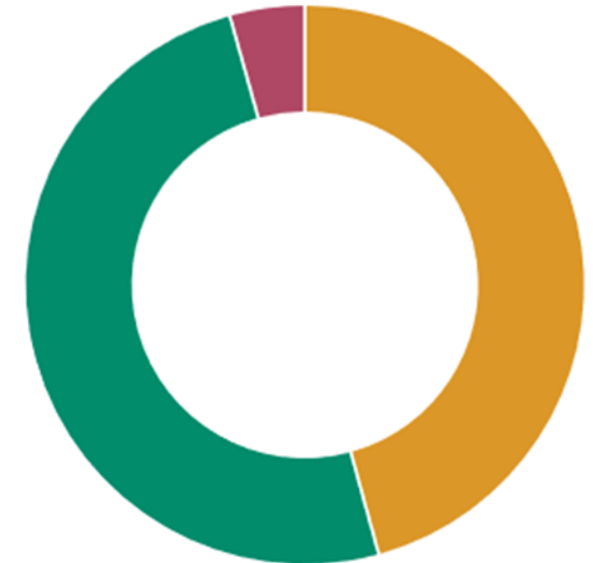
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Review Curriculum



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Ignore this till ACCS ST2

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[Intensive Medicine](#)

[Acute Medicine](#)

[Chronic Medicine](#)

[Procedure](#)

[Session](#)

Review Logbook

New Entry

[Workplace Based Assessment](#)

[Personal Activity](#)

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[ESSR Records](#)

[ARCP Outcomes](#)

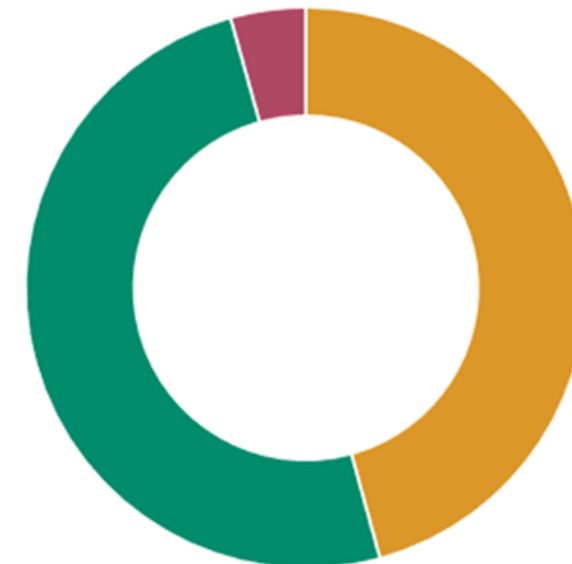
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Review Curriculum

PROBLEMS WITH LIFELONG LEARNING (& HOW TO BEAT THEM)

- 1) DOPS AREN'T ON THE CURRICULUM SO YOU CAN'T LINK THEM UP AFTER COMPLETING AN ASSESSMENT - TRY AND LINK THEM TO OTHER RELEVANT PARTS OF THE CURRICULUM (E.G. INFECTION CONTROL, CONSENT ETC) - AS LONG AS YOU ADD THEM TO YOUR CHECKLIST THIS DOESN'T MAKE ANY DIFFERENCE WHERE THEY ARE LINKED
- 2) THERE IS NO SPECIFIC FORM FOR MEETINGS WITH EDUCATIONAL OR CLINICAL SUPERVISORS - THE BEST THING TO DO IS TO JUST ADD THIS AS A "PERSONAL ACTIVITY - SUPERVISORY MEETING"
- 3) EACH CORE PRESENTATION CONTAINS NUMEROUS SUBHEADINGS TO 'LINK' - FORTUNATELY YOU DON'T NEED TO LINK TO **ALL** OF THESE SUBHEADINGS - AS LONG AS YOU HAVE REASONABLE COVERAGE YOU'LL HAVE ENOUGH TO GET THE CORE PRESENTATION SIGNED OFF. (SOME OF THESE WILL SAY MANDATORY WHERE RELEVANT)
- 4) EACH CORE PRESENTATION COMES WITH A 'CUT' (COMPLETION UNIT OF TRAINING FORM) - DON'T WORRY! FOR ACCS1 THESE **DON'T** NEED TO BE SIGNED, AS LONG AS YOUR SUPERVISOR IS HAPPY TO SIGN THE WRITTEN CHECKLISTS MENTIONED ABOVE.

TIPS TO MAKE YOUR LIFE EASIER...

- 1) EACH TIME YOU DO A WPBA, LINK TO ALL THE RELEVANT PRESENTATIONS
- 2) LINK WPBAS TO THE OTHER AREAS OF THE CURRICULUM (IE TO SHOW EVIDENCE OF HISTORY TAKING SKILLS, PATIENT RELATIONSHIP, EMPATHY ETC)
- 3) START EARLY - DON'T MAKE YOUR LAST 2 MONTHS OF EACH PLACEMENT A MISERY. 1-2 WPBAS A WEEK
- 4) EVERY TIME YOU ASK FOR ADVICE OR WORK ALONGSIDE A SENIOR, THINK "COULD I MAKE THIS INTO A CBD" AND DON'T BE AFRAID TO ASK!
- 5) MAKE YOUR REFLECTIONS GOOD (PROBABLY NEED AT LEAST 6-8). CAN REFLECT ON TEACHING, EVENTS, DIFFICULT CONVERSATIONS ETC

IN SUMMARY

- 1) DO START EARLY (I.E. NOW) AND IDENTIFY WHO IS GOOD AT RETURNING WBPAS
- 2) LINK ACTIVITIES TO MORE THAN ONE PART OF THE CURRICULUM WHERE RELEVANT
- 3) IGNORE CUT FORMS, THESE AREN'T RELEVANT TILL NEXT YEAR
- 4) THE PAPER CHECKLISTS ARE A GOOD GUIDE, CHECK THESE IF YOU'RE UNSURE
- 5) MAKE SURE YOUR SUPERVISOR IS HAS ACCESS TO LIFELONG LEARNING EARLY ON
- 6) EACH TIME YOU DO AN ASSESSMENT YOU'LL NEED A NAME, GMC NUMBER AND EMAIL ADDRESS TO BE ABLE TO SEND THIS TO THE RELEVANT PERSON
- 7) TRY TO REMEMBER TO LABEL THINGS IN A WAY THAT MAKES THEM EASY TO FIND (THE FIRST FEW WORDS BECOME THE TITLE SO TRY AND NAME IT "UGIB" OR "SORE THROAT - MUMPS")
- 8) DON'T WORRY ABOUT THE CURRICULUM "DONUT" THIS DOESN'T WORK PROPERLY FOR ACCS

PLEASE DO FEEL FREE TO CONTACT ME IF YOU HAVE ANY FURTHER QUESTIONS.
MY EMAIL ADDRESS IS P.DORTONGIBSON@DOCTORS.ORG.UK

WOULD HIGHLY RECOMMEND FORMING AN ACCS ANAESTHETICS WHATSAPP GROUP
TO SO THAT YOU CAN ALL TOUCH BASE OR DISCUSS AN ISSUE TOGETHER.