**This form is to aid the trainee and their Educational Supervisor to ensure that the RCOG Matrix requirements have been met. Trainees should ensure evidence highlighted in shaded areas is printed for the ES and ARCP panel and that their e-portfolio is up to date for the ES and ARCP Panel to view and assess.**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Trainee Name:** | | | | **Educational Supervisor:** | | | | | | | | |
| **ST5 training year commenced:** | | **Proportion of ST5 year to be assessed\*:** | | **Current Trust:** | | | | | | | | |
| **Educational Supervisor to sign bold boxes below to confirm:** | | | | | | | | |
| **Educational Supervisors Report** – completed on e-portfolio | | | | To be completed on e-portfolio by ES | | | | | | | | |
| **CV** – **To include a sheet on achievements since last ARCP**  Copy to be retained by panel | | | | Trainee to produce for panel | | | | | | | | |
| **TEF** – completed on line | | | | Trainee to confirm completion: | | | | | | | | |
| **Curriculum Progress** –   1. Completion of all intermediate competencies in 2013 curriculum e-portfolio logbook by end of ST5 2. For trainees starting ST1 before August 2013: Completion of Basic Ultrasound Modules with summative OSATs   **It is mandatory that all intermediate logbook competencies and basic ultrasound modules are competed by the end of ST5**  **- To be confirmed by ES** | | | | 1. **Completion of intermediate competencies**  (to be signed by ES ) | | | | | | | Incomplete - to be reviewed by panel:  (ES to indicate if incomplete) | |
| 2. **Completion USS modules (for trainees starting ST1 before Aug 2013)**  (to be signed by ES) | | | | | | | Incomplete - to be reviewed by panel  (ES to indicate if incomplete) | |
| **MRCOG Part 2 (or 2&3 if after 2016)**  – Mandatory for completion of ST5 | | | | Date passed: | | | | | | | | |
| **Formative OSATS showing evidence of training**  **(**Assessor to be ST6 or above)  **ES to sign to confirm that for the whole of ST5, on e-portfolio there are formative OSATs for:**   1. Intermediate operative laparoscopy (e.g. ectopic pregnancy surgery/ ovarian cystectomy/ salpingectomy/ oopherectomy)  * **Summative OSATs can be substituted for above** * **If < 1 training year, then proportion needed (record number)** | | | | 1 | ES to sign to confirm formative OSATS for Intermediate operative laparoscopy | | | | | | | |
| **Summative OSATS CONFIRMING achieving competence (3 of each – can have been achieved in previous ST years)**  (At least 2 assessors ST6+, at least 1 to be consultant)  **ES to sign to confirm that for the whole of ST1-5, on e-portfolio there is a minimum of:**   1. Simple operative laparoscopy (lap steri/ simple adenexal surgery eg adhesiolysis/ ovarian drilling) (3) 2. Intermediate caesarean (3) 3. Perineal repair (3rd degree tear) (3) 4. Rotational assisted vaginal delivery – any method (3)   **Basic USS Module (applicable at ST5 for trainees starting ST1 before 2013), the Basic Ultrasound Modules must be complete by the end of ST5 including demonstrating competence by summative OSATs in:**  Basic Ultrasound module (3 OSATs of each) – assessor to be ST6+/ consultant or supervising ultrasonographer   1. TAS early pregnancy (8-12 weeks) (3) 2. Fetal Measurement. Lie and presentation (3) 3. Liquor assessment (3) 4. Placental assessment (3)  * **If <1 training year, then proportion needed (record number)** * **May have been achieved in previous training years** | | | | 1 | ES to sign to confirm 3 summative OSATs for simple operative laparoscopy | | | | | | | |
| 2 | ES to sign to confirm 3 summative OSATs for intermediate LSCS | | | | | | | |
| 3 | ES to sign to confirm 3 summative OSATS for 3 degree tear | | | | | | | |
| 4  1  2  3  4 | ES to sign to confirm 3 summative OSATs for rotational delivery  ES to confirm 3 summative OSATs in TAS 8-12 weeks | | | | | | | |
| ES to confirm 3 summative OSATs for fetal meas/ lie/ pres | | | | | | | |
| ES to confirm 3 summative OSATs for AFI | | | | | | | |
| ES to confirm 3 summative OSATs for placental assessment | | | | | | | |
| **Consultant Observed Summative OSATS reaffirming CONTINUING competency since final ST4 ARCP (1 of each only required)** (Assessor to be Consultant/ GMC accredited Clinical Supervisor)  **ES to sign to confirm that for the whole of ST5 , on e-portfolio there is a minimum of:**   1. Operative vaginal delivery (1) 2. Laparoscopy (1) 3. Hysteroscopy (1) 4. Basic USS (for trainees who have completed Basic USS module in preceding years):    1. TAS 8-12 weeks    2. Fetal measurements/ lie/ presentation    3. Assessment of liquor    4. Placental assessment   **If < 1 training year, then proportion needed (record number)** | | | | 1 | ES to confirm 1 summative OSAT for operative Vag del | | | | | | | |
| 2 | ES to confirm 1 summative OSAT for laparoscopy | | | | | | | |
| 3 | ES to confirm 1 summative OSAT for Hysteroscopy | | | | | | | |
| 4 | 1 | | | ES to confirm 1 summative OSAT for TAS | | | | |
| 2 | | | ES to confirm 1 summative OSAT for Fetal measurements | | | | |
| 3 | | | ES to confirm 1 summative OSAT for assessment of liquor | | | | |
| 4 | | | ES to confirm 1 summative OSAT for placental assesssment | | | | |
| **Minicex** (8)  4 Obs and 4 Gyne | **CBDs** (8)  4 Obs and 4 Gyne | | **Reflective Practice (8)**  Including all significant events and complaints (form R) | Mcex  ES to sign | | | | | CBD  ES to sign | | | RP  ES to sign |
| **Regional Teaching**  SWOT/Logbook/SWAT  5 days minimum attendance over one FTE training year required  Trainee to confirm number attended (certificates to be uploaded into e-portfolio personal library) | | | | Number attended: | | | | | | Trainee’s signature: | | |
| **TO2s**  ES to confirm if acceptable (or whether concerns should be raised to ARCP panel)  Trainee to print T02 summaries for panel | | | | No concerns raised:  ES to sign | | | | | | Concerns to be reviewed by panel:  ES to indicate and describe in ES report | | |
| **Clinical Governance**  ES to confirm :   1. 1 x completed and presented project (Patient Safety, Audit, risk management, QI project- can include supervision of junior doctors) 2. Evidence of attendance at local risk management meetings | | | | 1 | | | ES to sign for project | | | | | |
| 2 | | | ES to sign to confirm trainee’s attendance at risk management meetings | | | | | |
| **Teaching experience:**  Trainee needs to have organised or delivered teaching as part of **regional** programme (eg.SWOT/ SWAT day)  Or other **regional** event | | | | ES to sign that trainee has organised or delivered regional teaching | | | | | | | | |
| **Leadership and Management:**   1. Evidence of departmental responsibility 2. Works with consultants to deal with correspondence and clinical admin 3. Dealing with complaints 4. Involvement in departmental meeting/ forum/ review process | | | | ES to sign to confirm engagement of the trainee with all 4 aspects of leadership and management | | | | | | | | |
| **Presentation/Publications**   1. ES to confirm that at least one presentation outside own department eg regional/national/ international presentation, has been undertaken 2. Discussion with ES to optimise CV to ensure competitive for ATSM/ sub spec opportunities | | | | 1 | | ES to sign to confirm presentation | | | | | | |
| 2 | | ES to sign to confirm CV discussed | | | | | | |

Proportion of training to be given in months e.g. 11/12 for full-time trainees for 11 months. For LTFT @60% - full ST year training time is 20 months (so 12 months training is 12/20 ratio for achieving targets). For LTFT@80% - full ST year training is 15 months (so 12 months training is 12/15 ratio for targets)