Community Child Health Grid Training Guidance To ARCP For Trainees & Supervisors

This guide sets out how to use the Kaizen ePortfolio system in order to fulfil the requirements of the ARCP and Community Child Health CSAC Progression. Using this guide should standardise the way an Educational Supervisor Report and CSAC Progression Review is conducted.

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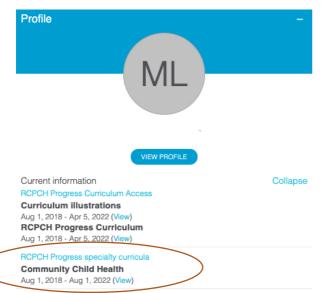
1. Things to do when Appointed to the Community Child Health Grid Programme

- Ensure the Community Child Health curriculum is added to your e-portfolio. If not, contact training.services@rcpch.ac.uk to request it to be added.
- 2) Add your educational supervisor in the normal way
- 3) Read the Community Child Health curriculum and illustrations to inform your PDP
- 4) Be aware of how the CSAC process works alongside your ARCP process (see section 6)

2. Checking the Expiry Date on your Community Child Health Curriculum

Once you have started Community Child Health grid training, the RCPCH gives you access to the sub-speciality Community Child Health curriculum on ePortfolio for 5 years. The access to the curriculum is also used by the RCPCH to keep track of which trainees are in community child health grid training. If your training extends over 5-years (due to mat leave, LTFT, OOP etc) your access to the curriculum expires and is removed. When this is removed it means you can't tag your events to the community child health curriculum and when the CSAC obtains the list of community child health grid trainees from RCPCH your name won't appear, and you will miss vital annual reviews in order to progress to CCT.

Therefore, ensure you check when your community child health sub-speciality curriculum is due to expire (especially if your training is due to take longer than 5 years). This can be seen on your dashboard on ePortfolio. Half way down, on the right-hand side, your Profile will appear. It will list what curricula access you have. You should see the RCPCH Progress speciality curricula Community Child Health with the date range (illustrated in figure below).



If you a) don't have this listed or b) the 2nd date is before your expected CCT date then please contact <u>training.services@rcpch.ac.uk</u> and ask them to extend the date.

3. Linking Your Events on Kaizen to the Curriculums – "Tagging"

You need to tag to both the <u>Level 3 Generic syllabus</u> and the <u>community child health subspecialty</u> <u>curriculum</u> You <u>do not</u> need to tag to the General Paediatric Level 3 Curriculum.

In order to CCT you must use these tags to demonstrate an appropriate breadth and depth of learning and experience.

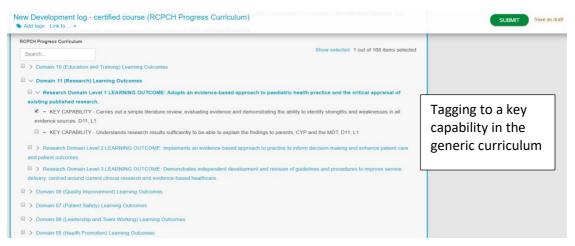
If you are unsure of how to create an "Event" in ePortfolio please read the following <u>guidance</u>. At the bottom of each event you will the opportunity to tag to the curricula.

Your events should be focused and tagged against the **key capabilities**. If they are broader then it would be appropriate to tag against the **learning outcome/sub-speciality learning outcome**. You should not be tagging against the Domain in the generic curriculum under any circumstance.

Please note it is exceptional for any one assessment to link to more than two Learning Outcomes/subspeciality learning outcomes. Whilst any event may touch on many learning outcomes and key capabilities, we are interested in the learning (rather than the coverage) which is generally focussed to one or two areas.

Examples of how to tag:

See below for example of tagging to a level 3 Progress generic curriculum key capability



See below for example of how to tag to a key capability of the subspecialty community child health curriculum.

RCPCH Progress Curriculum	
Search	
□ > Domain 01 (Professional Values and Behaviours) Learning Out	comes
□ > Domain 02 (Communication) Learning Outcomes	
□ > Domain 03 (Procedures) Learning Outcomes	
> Domain 04 (Patient Management) Learning Outcomes	
□ > Domain 05 (Health Promotion) Learning Outcomes	
□ > Domain 06 (Leadership and Team Working) Learning Outcomes	3
□ > Domain 07 (Patient Safety) Learning Outcomes	
□ > Domain 08 (Quality Improvement) Learning Outcomes	
□ > Domain 09 (Safeguarding) Learning Outcomes	
□ > Domain 10 (Education and Training) Learning Outcomes	
Domain 11 (Research) Learning Outcomes	
□ > Community Child Health	Click here to expand the community child

 $\Box \sim$ Community Child Health

□ > SLO 1. Demonstrates proficiency in the paediatric assessment and management of vulnerable children, including those with developmental disorders and disabilities

SLO 2. Adopts a leading role with children who are at risk of abuse or are being abused and for those who are "looked after", and can contribute to the process of adoption

□ > SLO 3. Demonstrates strong skills in working with multiple agencies, particularly with education and social care

SLO 4. Actively participates in planning and implementing local strategies to improve the health of all children in their area, including safeguarding policy and overseeing universal and targeted lifestyle programmes

□ > SLO 5. Contributes with other professionals to the management of children with life-limiting complex disability

Click on each SLO (Specific Learning Outcome) to expand and show the relevant key capabilities □ ∨ SLO 1. Demonstrates proficiency in the perdiatric assessment and management of vulnerable children, including those with developmental disorders and disabilities

SLO 1 KEY CAPABILITY Demonstrates proficiency in the assessment, diagnosis and management of children with a broad range of disabilities, including physical disability genetic disorders and neuro-developmental disorders, and manages co-morbidities in these groups.

□ ✓ SLO 2. Adopts a leading role with children who are at risk of abuse or are being abused and for those who are "looked after", and can contribute to the process of adoption

Image: SLO 2 KEY CAPABILITY Demonstrates proficiency in assessing the health needs of "looked after" children and is able to recognise developmental and mental health conditions occurring in the "looked after" population.

□ - SLO 2 KEY CAPABILITY Formulates a comprehensive plan for a "looked after" child's physical, developmental and emotional needs, and communicates these effectively to non-medical professionals through report writing and participation in statutory processes.

SLO 2 KEY CAPABILITY Examines the whole child, including the genitalia, recognising signs of abuse and/or neglect.

SLO 2 KEY CAPABILITY Formulates differential diagnoses, conducts appropriate investigations and advises safeguarding agencies on their findings.

□ ✓ SLO 3. Demonstrates strong skills in working with multiple agencies, particularly with education and social care

□ - SLO 3 KEY CAPABILITY Works effectively with other agencies (such as educational and social care) and the voluntary sector to support and manage children with neuro-developmental conditions/disabilities, including providing advice for statutory processes (e.g. the Education Health and Care Plan [EHCP]).

□ - SLO 3 KEY CAPABILITY Formulates a comprehensive report on a child's physical, developmental and emotional presentation and communicates these effectively to both non-medical professionals and the courts through report writing and participation in statutory processes.

SLO 4. Actively participates in planning and implementing local strategies to improve the health of all children in their area, including safeguarding policy and overseeing universal and targeted lifestyle programmes

SLO 4 KEY CAPABILITY Applies knowledge of public health to work with other agencies to provide paediatric input for the commissioning and planning of services for children

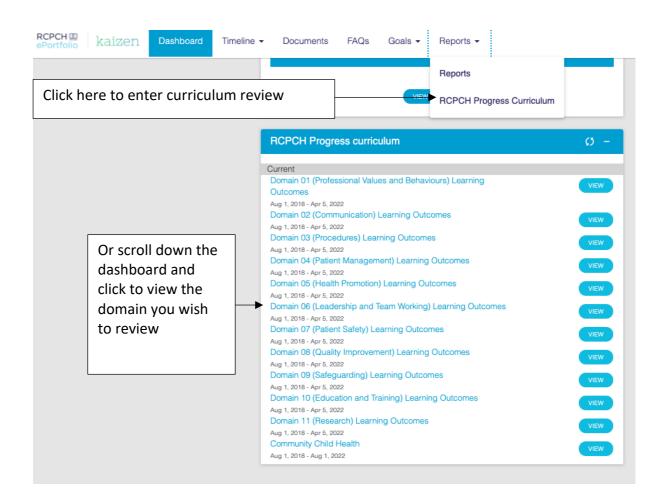
□ ✓ SLO 5. Contributes with other professionals to the management of children with life-limiting complex disability

SLO 5 KEY CAPABILITY Contributes to end-of-life care plans for children with complex disability.

4. <u>Reviewing your curriculum coverage</u>

You will need to review your curriculum coverage (both the <u>Generic Level 3</u> and the <u>Community Child</u> <u>Health</u>) throughout your training and at each meeting with your supervisor. A review of both curricula is carried out in the Educational Supervisors Report for ARCP, as well as being the basis of the CSAC Progress Review Form.

To review your curriculum coverage, go to the Reports section on ePortfolio. To enter either click on the Reports Tab, then RCPCH Progress curriculum or enter via the dashboard (see screen shot below):



In the reports section you can then select a specific domain/learning outcome/key capability and

review your progress in that area (see screen shot below).

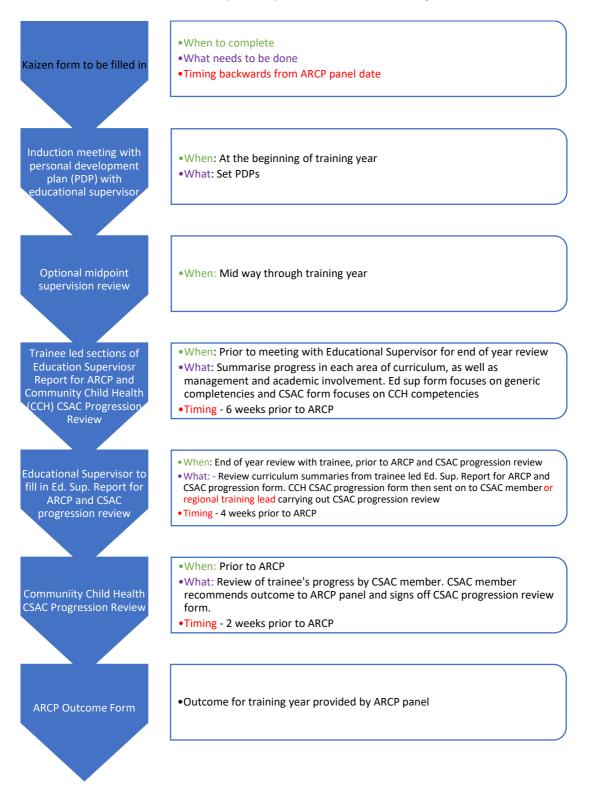
Events tagged to that part of the Level 3 Generic and or/CCH syllabus

R C P C H Progress Curriculum	Events created in July 2020	
This shows the tags available for RCPCH Progress Curriculum . Events tagged with this information are hown on the right hand side.	Development log - reflection (RCPCH Progress Curriculum) Log title Referral to First Response for mother requesting additional support	
Select items from the below to see which events have been tagged with them on the right hand side	A Make private 🧐 Show audit log	
Search Show selected 1 out of 169 items selected	Events created in June 2020	
Community Child Health (113 tags)	Development Log - Education Meetings / CPD (RCPCH Progress Curriculum)	
⇒ Domain 01 (Professional Values and Behaviours) Learning Outcomes (12 tags)	Log title ST6-8 Palliative Care Teaching - half day	
> Domain 02 (Communication) Learning Outcomes (19 tags)	A Make private D Show audit log	
> Domain 03 (Procedures) Learning Outcomes (35 tags)	Development log - reflection (RCPCH Progress Curriculum)	
Domain 04 (Patient Management) Learning Outcomes (109 tags)	Log title Management of patient nearing end of life	
> Domain 05 (Health Promotion) Learning Outcomes (22 tags)	A Make private D Show audit log	
> Domain 06 (Leadership and Team Working) Learning Outcomes (22 tags)	Development log - certified course (RCPCH	
> Domain 07 (Patient Safety) Learning Outcomes (10 tags)	Progress Curriculum)	
> Domain 08 (Quality Improvement) Learning Outcomes (7 tags)	Log title Introduction to Acquired Brain Injury - SHIPS course (Supporting Head Inju	
Domain 09 (Safeguarding) Learning Outcomes (46 tags)	Development Log - Education Meetings / CPD	
> Domain 10 (Education and Training) Learning Outcomes (22 tags)	(RCPCH Progress Curriculum)	
	Log title ST6-8 CCH Training Day	
Domain 11 (Research) Learning Outcomes (2 tags)	Make private D Show audit log	

The aim is full coverage of the curriculum therefore use this review to identify areas in which coverage is not complete. Use this information to inform PDP development and formulate learning objectives.

5. <u>CSAC Progression Reviews and ARCPs</u>

See the flow chart below for a summary of the process, and the following text for further details.



Prior to education supervisor end of year review meeting

- 1) Fill in the trainee led section of the "Educational supervisor report for ARCP".
 - Answer questions regarding life support, child protection, courses attended etc.
 - Generate a report for each domain of the generic curriculum (see screen shot below).
 This will pull across any events tagged to that domain in specified time frame. Ensure the date specified is the start of your level 3 training in order to include all relevant events.
 - Following the report, you need to summarise your progress in each domain, highlighting areas of excellence and things to improve.
 - The form then needs to be submitted to your educational supervisor.

Domain 01 - Professional Values and Behaviours				
Learning Outcome 1 - Level 1 (ST1-ST3) - In addition to the professional values and behaviours required of all doctors (Good Medical Practice), a paediatric trainee must maintain confidentiality, but judges when disclosure may be required in relation to safeguarding, taking into account the differing legislation and health services between the four countries. Learning Outcome 1 - Level 2 (ST4-ST6) - Adheres to the specific legislation (including safeguarding) and healthcare systems between the four countries which applies to children and families, acts as a role model and guide to junicr colleagues, developing an ensuring professional values and behaviours in relation to paediatrics and encouraging an open and supportive working environment.				
Domain 01 - Professional Values and Behaviours - Assess Completed on or after ★	nent Summary Report *			
Aug 1, 2017	Generate report here, ensuring date is start of level	3 training		

- 2) Fill in the trainee led section of the Community Child Health CSAC Progression Review
 - Answer questions regarding start of Grid training, training posts, expected CCT, % working time equivalent etc.
 - For each of the key capabilities click to generate a report. This will pull across all events tagged to that key capability (see screen shot below for example).
 - You then need to comment on the evidence. This may include highlighting the main pieces of evidence that you have, areas of excellence and any areas where you can improve. An example of what you may write when commenting on your progress in key capability "Formulates a comprehensive plan for a "looked after" child's physical, developmental and emotional needs, and communicates these effectively to nonmedical professionals through report writing and participation in statutory processes. " an example of what you may write is:

Main pieces of evidence: My developmental logs of Looked After Child Health clinics I have undertaken, case-based discussion of LAC initial health assessment on (insert date) and Discussion of Correspondence DOC assessment of LAC health report (insert date)

Area of excellence: I feel that the case-based discussion regarding the initial health assessment of a teenager recently placed in foster care highlights my ability to consider the wider emotional needs of the young person in addition to reviewing their immediate medical needs.

Area to improve: I want to further improve my skills communicating with young asylum seekers. I am therefore planning to spend some time shadowing at our local specialist primary healthcare service for asylum seekers and refugees.

- You will also need to summarise your management experience and academic experience i.e. research, teaching, projects.
- You then need to submit the form to your educational supervisor.

At your educational supervisor meeting:

- 3) Complete Educational supervisor report for ARCP
 - In your "Educational supervisor report for ARCP" your supervisor will need to review your progress in completing the generic curriculum.
- 4) Complete Community Child Health CSAC progression form
 - Your educational supervisor will need to answer questions regarding concerns about progress, training opportunities and whether START assessment has been done.
 - Your educational supervisor will need to review your comments for each key capability, stating whether they feel that you are making appropriate progress and summarising what still needs to be achieved and how (see screen shot of the educational supervisor form below). Referring back to the <u>curriculum</u> may be helpful at this point in order to see examples from the illustration for ideas related to each key capability
 - Your educational supervisor then needs to do the same for the academic section.
 - At the end of the report specific targets can be summarised, to give a clear plan of what you need to work on before the next review.

• The CSAC progression form is then sent on to the CCH CSAC member carrying out the CSAC progression review. This is likely to be the CCH lead in your area, and if not them they will be able to tell you who it is and you will need to tell your supervisor so they can forward it on.

CSAC Progression Review

5) You will then have your CSAC progression review by a member of the Community Child Health CSAC. The CSAC member will then complete the Community Child Health CSAC Progression Form and recommend an outcome for ARCP.

ARCP

6) You will then have an ARCP, where all your portfolio will be reviewed including your Community Child Health CSAC progression form, with outcomes determined for both CCH grid and generic competencies.

Please note that although 6 weeks lead in to the ARCP sounds like a long time, each person needs to have a two week window to be able to look at your form – this is to allow for clinical workloads, on calls, holidays etc. The CSAC member will need two weeks, and most ARCP panels want paperwork ready (or Kaizen up to date) two weeks prior to ARCP to allow prep in advance, hence the advice that you start this process six weeks prior to ARCP.