**HEENW - WEST (Mersey) SECTOR**

**NEW TRAINING PROGRESSION CHECKLIST**

**(Each Trainee to complete before Annual ARCP & Interim Review)**

**COMPLETE ELECTRONICALLY, SAVE TO ISCP UNDER “OTHER EVIDENCE” & EMAIL A COPY TO**

**maria.odonnell@liverpoolft.nhs.uk** **WELL IN ADVANCE OF YOUR ARCP & BRING A PAPER COPY WITH YOU ON THE DAY OF YOUR ARCP**

|  |  |  |  |
| --- | --- | --- | --- |
| **Trainee Name** |  | **NTN** |  |
| **GMC Number** |  | **Confirmed CCT Date** |  |
| **Date started ST3 training** |  | **Date Checklist Completed** |  |

**FRCS (Tr&Orth) Exam**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date FRCS 1 Passed |  | No attempts |  | Month / year planned |  |
| Date FRCS 2 Passed |  | No attempts |  | Month / year planned |  |

|  |
| --- |
| **Clinical Experience** |

|  |
| --- |
| Please list all previous ARCP outcomes (add extra rows if needed): |
| Level | Outcome | Hospital | Specialty | AES / CS |
| ST3 |  |  |  |  |
| ST3 |  |  |  |
| ST4 |  |  |  |  |
| ST4 |  |  |  |
| ST5 |  |  |  |  |
| ST5 |  |  |  |
| ST6 |  |  |  |  |
| ST6 |  |  |  |
| ST7 |  |  |  |  |
| ST7 |  |  |  |
| ST8 |  |  |  |  |
| ST8 |  |  |  |

**Timetables**

Evidence of at least 3 sessions of theatre lists & 2 sessions of clinics per week (inc. fracture clinics)

|  |  |  |  |
| --- | --- | --- | --- |
| Job | No sessions theatre | No sessions clinic | Date timetable uploaded to ISCP |
| ST3 |  |  |  |
| ST3 |  |  |  |
| ST4 |  |  |  |
| ST4 |  |  |  |
| ST5 |  |  |  |
| ST5 |  |  |  |
| ST6 |  |  |  |
| ST6 |  |  |  |
| ST7 |  |  |  |
| ST7 |  |  |  |
| ST8 |  |  |  |
| ST8 |  |  |  |

**WBAs completed**

*Minimum required per 6 month job are: PBA/DOPS (20), CBD (5), CEX (5)*

*CEXC – 1 for each indicative procedure, see list below*

*MSF – minimum of 1 per year, OOT – minimum of 1 per job*

*AOA – minimum of 1 per year*

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | PBA | DOPS | CBD | CEX | CEXC | MSF | OOT | AOA | **TOTAL** |
| ST3 |  |  |  |  |  |  |  |  |  |
| ST4 |  |  |  |  |  |  |  |  |  |
| ST5 |  |  |  |  |  |  |  |  |  |
| ST6 |  |  |  |  |  |  |  |  |  |
| ST7 |  |  |  |  |  |  |  |  |  |
| ST8 |  |  |  |  |  |  |  |  |  |
| **TOTAL** |  |  |  |  |  |  |  |  |  |

**Critical Condition CBD / CEX**

Must have achieved level 4 for each of the critical conditions by CCT

|  |  |  |  |
| --- | --- | --- | --- |
| **Condition** | **Assessor** | **Highest Level Achieved**  | **Date Achieved** |
| Compartment syndrome (any site) |  |  |  |
| Neurovascular injuries (any site) |  |  |  |
| Cauda equina syndrome |  |  |  |
| Immediate assessment, care and referral of spinal trauma |  |  |  |
| Spinal infections |  |  |  |
| Complications of inflammatory spinal conditions |  |  |  |
| Metastatic spinal compression  |  |  |  |
| The painful spine in the child |  |  |  |
| Physiological response to trauma |  |  |  |
| The painful hip in the child  |  |  |  |
| Necrotising fasciitis |  |  |  |
| Diabetic foot  |  |  |  |
| Primary and secondary musculo-skeletal malignancy  |  |  |  |
| Major trauma resuscitation (CEX) |  |  |  |

**CEX FOR CONSENT**

Trainees should complete a CEX for Consent for all indicative procedures.

These need to be all at level 4 by CCT.

|  |  |  |  |
| --- | --- | --- | --- |
| **Procedure** | **Date** | **Level** | **Assessor** |
| Major joint arthroplasty  |  |  |  |
| Osteotomy  |  |  |  |
| Nerve decompression  |  |  |  |
| Arthroscopy  |  |  |  |
| Compression Hip Screw for Intertrochanteric Fracture NOF  |  |  |  |
| Hemiarthroplasty for Intracapsular Fracture NOF  |  |  |  |
| Application Limb External Fixator  |  |  |  |
| Tendon Repair for trauma  |  |  |  |
| Intramedullary nailing including elastic nailing for fracture or arthrodesis  |  |  |  |
| Plate fixation for fracture or arthrodesis  |  |  |  |
| Tension band wire for fracture or arthrodesis  |  |  |  |
| K wire for fracture or arthrodesis  |  |  |  |
| Children’s displaced supracondylar fracture |  |  |  |

|  |
| --- |
| **Operative Experience & Competence** |

**Logbook Numbers**

These have to be completed between ST3 and ST8.

* 1,800 cases in total by CCT, averages as 300 per year (A, STU, STS, T, P).
* 1,260 (70% of the 1,800) cases as first surgeon, averages as 210 per year (STU, STS, P).
* Multiple operations at the same sitting, in the same anatomical area, must not be unbundled (e.g. within the same foot).
* Bilateral cases may count as two operations.
* Injections in any site do not count as part of the indicative numbers.

|  |  |  |  |
| --- | --- | --- | --- |
| Year | Total Number | Total Excluding Injections | Total as first surgeon |
| ST3 |  |  |  |
| ST4 |  |  |  |
| ST5 |  |  |  |
| ST6 |  |  |  |
| ST7 |  |  |  |
| ST8 |  |  |  |
| **TOTAL** |  |  |  |

**SAC Indicative Procedure Numbers**

These must be completed between ST3 and ST8

|  |  |  |  |
| --- | --- | --- | --- |
| **Procedure / Competency** | **Acceptable / Unacceptable Cases** | **Number Required** | **Number Achieved** |
| Major joint arthroplasty  | Total hip, knee, shoulder, ankle replacements |  |  |
| Osteotomy  | 1st metatarsal, proximal tibia, distal femur, hip, humerus, wrist, hand, paediatric, spinal. NOT allowed are Akin, lesser toe and MT 2-5 osteotomies |  |  |
| Nerve decompression  | Carpal tunnel, cubital tunnel, tarsal tunnel, spinal decompression, discectomy |  |  |
| Arthroscopy  | Knee, shoulder, ankle, hip, wrist, elbow |  |  |
| Compression Hip Screw for Intertrochanteric Fracture Neck of Femur  |  |  |  |
| Hemiarthroplasty for Intracapsular Fracture Neck of Femur  |  |  |  |
| Application of Limb External Fixator  |  |  |  |
| Tendon Repair for trauma  | Any tendon for traumatic injury (includes quadriceps and patella tendon)  |  |  |
| Intramedullary nailing including elastic nailing for fracture or arthrodesis  | Femur shaft, long CMN for subtrochanteric fracture, tibia shaft, humerus, hindfoot nail, arthrodesis e.g. knee  |  |  |
| Plate fixation for fracture or arthrodesis  | Ankle, wrist, hand, femur, tibia, humerus, forearm, clavicle, arthrodesis e.g. wrist  |  |  |
| Tension band wire for fracture or arthrodesis  | Patella, olecranon, ankle, wrist, hand  |  |  |
| K wire fixation for fracture or arthrodesis  | Wrist, hand, foot, paediatric  |  |  |
| Children’s displaced supracondylar fracture  | Displaced fracture treated by internal fixation or application of formal traction  |  |  |

**Indicative Procedure PBAs**

* 3 x Level 4 PBAs in each specific operation group listed below by two or more trainers except for supracondylar fracture and application of external fixator by CCT.
* For supracondylar fracture and external fixator application, 1 x PBA level 4 in a non-simulated setting is acceptable.
* One PBA may be assessed in simulation with prior agreement of AES & TPD.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Procedure** | **Date of level 4 PBA x 1** | **Assessor** | **Date of level 4 PBA x 2** | **Assessor** | **Date of level 4 PBA x 3** | **Assessor** |
| Major joint arthroplasty  |  |  |  |  |  |  |
| Osteotomy  |  |  |  |  |  |  |
| Nerve decompression  |  |  |  |  |  |  |
| Arthroscopy  |  |  |  |  |  |  |
| Compression Hip Screw for Intertrochanteric Fracture NOF  |  |  |  |  |  |  |
| Hemiarthroplasty for Intracapsular Fracture NOF  |  |  |  |  |  |  |
| Application Limb External Fixator  |  |  |  |  |  |  |
| Tendon Repair for trauma  |  |  |  |  |  |  |
| Intramedullary nailing including elastic nailing for fracture or arthrodesis  |  |  |  |  |  |  |
| Plate fixation for fracture or arthrodesis  |  |  |  |  |  |  |
| Tension band wire for fracture or arthrodesis  |  |  |  |  |  |  |
| K wire for fracture or arthrodesis  |  |  |  |  |  |  |
| Children’s displaced supracondylar fracture  |  |  |  |  |  |  |

|  |
| --- |
| **Research** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Evidence** | **Yes** | **No** | **Date / Details** |
| **All trainees must complete during training:** |
| Good Clinical Practice course (GCP) within 3 years of certification |  |  |  |
| Research methods training or a research methodology course |  |  |  |
| Evidence of Journal Club (CBDs and reflection) |  |  |  |
| **Trainees must also complete two of the following:** |
| Higher degree (MSC, MPhil, MD, PhD |  |  |  |
| 2 PubMed cited papers relevant to specialty (not case reports) |  |  |  |
| Minimum 2 presentations, national or international |  |  |  |
| Recruiting ≥5 patients into a REC approved study or ≥10 patients into a MCO study |  |  |  |
| **Advanced research evidence (May be used as alternatives to the requirements above):** |
| Membership of a trainee research collaborative with either a committee role of ≥24 months or running a collaborative project on a steering group or as a local lead |  |  |  |
| Membership of an NIHR portfolio study management group. |  |  |  |
| Co-applicant on a clinical trial grant application to a major funding body. |  |  |  |

|  |
| --- |
| **Quality Improvement** |

Minimum of 1 audit per year, evidenced by an AOA

|  |  |
| --- | --- |
| **Date of AOA** | **Title of Audit** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

Minimum of 2 closed loop audits during training, evidenced by an AOA

|  |  |
| --- | --- |
| **Date of AOA** | **Title of closed loop Audit** |
|  |  |
|  |  |

|  |
| --- |
| **Medical Education & Training** |

Trainees should provide evidence of their commitment to teaching by attending a ‘Train the Trainers’ course or equivalent

|  |  |
| --- | --- |
| **Date of course** | **Awarding organisation** |
|  |  |

Trainees must complete at least 1 lecture / presentation / teaching session per job, evidenced by an OOT

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of OOT** | **Level** | **Assessor** | **Title of teaching & who delivered to** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| **Management & Leadership** |

Trainees must provide evidence of leadership and management by completing an appropriate course

|  |  |
| --- | --- |
| **Date of course** | **Awarding organisation** |
|  |  |

|  |
| --- |
| **Additional Courses** |

ATLS (or ETC) – qualification must be current at time of CCT

ATLS Instructor? **Eligible**

|  |  |
| --- | --- |
| **Date of course** | **Awarding organisation** |
|  |  |

Equality & Diversity

|  |  |
| --- | --- |
| **Date of course** | **Awarding organisation** |
|  |  |

|  |
| --- |
| **Commitment to CPD** |

Trainees must provide evidence of commitment to CPD through attending courses / conferences and meetings throughout training.

**Courses**

|  |  |  |
| --- | --- | --- |
| **Date**  | **Title** | **Venue / Organised by** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Conferences**

|  |  |  |
| --- | --- | --- |
| **Date**  | **Title** | **Venue / Organised by** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Other Meetings**

|  |  |  |
| --- | --- | --- |
| **Date**  | **Title** | **Venue / Organised by** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Journal Club**

|  |  |  |
| --- | --- | --- |
| **Date**  | **Title & Venue** | **How / where evidenced in Portfolio** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**This form will build as your training progresses to provide evidence of your development as an Orthopaedic & Trauma Surgeon and will ultimately provide the evidence required for your CCT.**