

ARCP DECISION AID FOR OCCUPATIONAL MEDICINE

| Type of Assessment to be submitted | ST3 (Number required) | ST4 (Number required) | ST5 (Number required) | ST6 (Number required) |
|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Learning Agreement | ✓ | | | |
| Workplace assessments* | 2 | 2 | | |
| First Aid | 1 | 1 | | |
| Health surveillance programmes | 1 | 1 | | |
| Environmental assessments | | 1 | | 1 |
| Health promotion | | | | 1 |
| Clinical audits | | 1 | | 1 |
| Dissertation protocol accepted (unless MSc) | | ✓ | | |
| Mini CEXs | 4 | 4 | 4 | 4 |
| SLEs- DOPS | 4 | 4 | 4 | 4 |
| MSFs | 1 | 1 | 1 | 1 |
| CBDs* | 8 | 8 | 8 | 8 |
| Sail OH 1* | 2 | 2 | 2 | 2 |
| Sail OH 2* | 2 | 2 | 2 | 2 |
| Letter from Faculty confirming dissertation approved | | | | ✓ |
| MFOM part 1 passed | ✓ | | | |
| MFOM part 2 passed** | | | | ✓ |
| Patient survey [∞] | | ✓ | | ✓ |
| CPD return † | ✓ | ✓ | ✓ | ✓ |
| Educational supervisor's report | ✓ | ✓ | ✓ | ✓ |
| Log book (From FOM website) | ✓ | ✓ | ✓ | ✓ |
| GMC anonymous Trainee survey | ✓ | ✓ | ✓ | ✓ |
| GMC criteria to be a Trainer completed (<i>advised</i>) | | | | ✓ |
| Form R declarations (A & B)- full scope of practice | ✓ | ✓ | ✓ | ✓ |

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| | | | | |
|--|----|----|---|----|
| Agreed learning SMART objectives/PDP | ✓ | ✓ | ✓ | ✓ |
| Attendance required at ARCP (Pastoral or Face to face <u>request</u>)-PYA <u>yes</u> (ST5) | ✓? | ✓? | ✓ | ✓? |
| | | | | |

* Or pro-rata number rounded **up** for LTFT trainees (see table below)

** Can be taken within ST4 year onwards

- The numbers given are an **absolute minimum**- but as the training programme is an experiential training curriculum-you should consider to deliver more (25%+) having agreed this as part of your PDP, especially if particular issues requiring development have been highlighted during your ongoing regular reviews throughout the current training year, including previous ARCP panel discussions etc. Reference to GMC recommended reflective toolkit added.

| | 60% LTFT | 80% LTFT | 100% training time |
|-------------|----------|----------|--------------------|
| Mini -CEX | 2 | 3 | 4 |
| SLE-DOPS | 2 | 3 | 4 |
| MSF | 1 | 1 | 1 |
| CBD | 5 | 6 | 8 |
| SAIL (OH) 1 | 1 | 2 | 2 |
| SAIL (OH)2 | 1 | 2 | 2 |

<http://www.fom.ac.uk/wp-content/uploads/CURRICULUM-OCCUPATIONAL-MEDICINE-January-2016.pdf>

- Reflective practice is encouraged using recognised templates (if possible) which are then discussed with your trainer. Patient identifiable information should not be included in the written communication.
- ∞ Currently is not a curriculum requirement but some training environments are starting to incorporate this as routine. ✖- NOT essential but preparation for consultant role.

FOM Training Guidance- June 2016

- four workplace assessments by the end of ST4
- details of advice given on first aid arrangements to two workplaces by the end of ST4
- details of the evaluation of two health surveillance programmes by the end of ST4
- details of assessment of environmental impact of two organisations by the end of ST6
- details of the evaluation of a health promotion programme by the end of ST6
- details of two clinical audit projects by the end of ST6
- details of dissertation protocol by ST4 and dissertation by the end of ST6

Reference

<http://www.fom.ac.uk/wp-content/uploads/Section-4-Training-CPD-Record-June-2016.docx>

<https://www.lpmde.ac.uk/training-programme/specialty-schools/occupational-medicine/files/arcp-trainee-guide>

http://www.aomrc.org.uk/wp-content/uploads/2018/08/Reflective_Practice_Toolkit_AoMRC_CoPMED_0818.pdf