Annual Review of Competence Progression Checklist for Work Place Based Assessments in ACCS CT/ST1 in Iceland

Trainee Name:
ID number/Kennitala:
Icelandic medical registration number:

Overview by end of CT/ST1

Structured Training Report x2 (one for each placement)	YES / NO
	(please circle)
MSF – minimum of 12 responses (annual)	Date
with spread of participants as agreed with Educational Supervisor	
ACCS AM trainees only - Multi Consultant Review x 4	YES / NO (please circle)
Evidence of Audit or Quality Improvement Project (one every 12 months)_1	YES / NO (please circle)
Progress in relevant post graduate examinations:	Exams achieved
ALS or equivalent (upload certificate to ePortfolio)	Date
Safeguarding Children Level 2 (upload certificate to ePortfolio)	Date
Progress toward achieving level 2 common competences confirmed by supervisor and trainee (red and blue man symbols)	YES / NO (please circle)
Number of <u>core</u> training days attended (upload certificates to ePortfolio) ²	(please circle) Number
	YES / NO (please circle)

To be completed by trainee and countersigned by Educational Supervisor

Trainee signature:	Date:	
Education Supervisor signature:	Date:	
Education Supervisor name PLEASE PRINT		

- 1. Progress of clinical research projects can be considered equivalent of an Audit or QIP if deemed appropriate by the ARCP panel
- 2. Core training days includes attendance at weekly educational activities.