

# ISCP Action List for the RCP process – ST1-3 (2024 curriculum)

The checklist below is intended as a summary guide to ensure all the correct information is recorded on the ISCP for both interim RCPs, usually conducted in the first six months of ST1 and ST2, respectively (unless otherwise specified) and the final RCPs which are usually carried out in months 10-12 of ST3.

This all takes time, and it is wise for STs to allow at least 30 minutes every week to update their ISCP. This 'Action List' is not intended as a substitute for the ISCP Guidelines so please refer to these for more details and speak to your AES or TPD if you have any queries. It is not possible to add details to ISCP until the enrollment fee has been paid. Please ensure you upload evidence to the correct section of the portfolio as indicated below, this will greatly assist with the RCP process and reduce the number of outcomes issued related to missing evidence.

Section of ISCP		Action by trainee	Action by TPD	Action by AES
<b>Trainee History Timeline</b>	Record any changes to level of training or TPD.	Update annually.	Validate	
<b>Profile</b>	Photograph CV	Add and update annually.		
<b>Placement</b>	Choose main hospital base and then 'other hospital/location' to add DGH. Only have one placement per year Add the name of your AES and the names of all your CSs to allow them to add comments.	Add	Validate	
<b>Timetable (Rota)</b>	Sessions should indicate whether they are a clinical or non-clinical session  The drop-down boxes are not very descriptive for specific clinical or non-clinical sessions so choose 'Other' and provide the nature of the session (e.g. personal treatment; new patient; review clinic; MDT clinic e.g. study, research, audit, etc; please avoid use of admin term).	Record in detail in Rota section. The timetable should be updated for every RCP.	Review to ensure compliance with SAC guidance.	Review
<b>Global</b>	Added by the TPD.		Add	

Objectives (GO)				
<b>Learning Agreement (LA)</b>	<p>This will include:</p> <ul style="list-style-type: none"> <li>• Objective setting</li> <li>• Recording topics</li> <li>• Actions required to meet learning objectives</li> </ul> <p>Topics selected should be relevant to each year of training.</p>	<p>Create for each placement.</p> <p>The LA needs updating at each meeting with progress demonstrated against the set curriculum objectives.</p>	Review	<p>Create for each placement.</p> <p>Log progress.</p>
<b>AES Meetings</b>	<p>Record dates and details of all meetings with a minimum number of 3 meetings per placement.</p> <p>The final meeting is to be undertaken just prior to the yearly RCP (for a one year placement)</p>	Record minutes of every AES meeting.	Review	Confirm minutes of every meeting.
<b>AES Report</b>	<p>This is the first area the RCP panel will review to understand how a trainee is progressing. It is therefore essential that the portfolio is well evidenced to enable the AES to provide an accurate assessment. The contribution of CS comments is especially important.</p> <p>For interim RCPs this will be viewed by the RCP panel in the LA of the Trainee Progress report.</p> <p>For ARCPs a final report will be generated via ISCP for the AES to complete.</p>	Discuss with AES prior to RCP.	Review	<p>Complete and discuss with ST.</p> <p>Write interim report and final report in parallel with LA to allow progress against the LA to be monitored.</p>

<b>Work based assessment &amp; spread</b>	<p><b>Year 1:</b> 6 DOPs; 2 CEX; 2 CBD; 1 MSF (must complete at least 4 satisfactory WBA including MSF by Year 1 interim RCP);</p> <p><b>Year 2:</b> 4 DOPs; 3 CEX; 3 CBD; 1 MSF ; 2 OCP-ST2s (refer to later section for detail);</p> <p><b>Year 3:</b> 4 DOPs; 3 CEX; 3 CBD; 1 MSF; 2 OCP-ST3s (refer to later section for detail)</p> <p>The recommendation is that not more than 2 WBAs should be assessed by a ST4-5 trainee per trainee/year of training.</p> <p>No more than 2 WBAs undertaken in a simulated setting should be counted/year.</p>	<p>Set up at least 1 WBA per month with a range of supervisors.</p> <p>WBAs are designed to inform learning throughout the whole year of training and should not be clustered around RCPs.</p>	<p>Need to be aware of problems in achieving competencies especially prior to signing examination forms.</p>	<p>Check WBA progress every three months.</p> <p>Carefully monitor Year 3 WBA to ensure progress appropriate for timing of exams.</p>
<b>Multi-source feedback (MSF)</b>	<p>Multi-Source Feedback (MSF) should be conducted in readiness for the first interim RCP at 6 months into training and then annually. Twelve raters (who are able to make objective judgements about the performance of the ST) should be chosen. These raters should include the AES, 3 consultants, 2 senior nurses, 3 other trainees (senior and junior) and 3 other types of health care professional or administrator.</p> <p>Raters should be chosen so that they are distributed between training sites (Dental and Regional Hospital).</p>	<p>Plan the list of 12 raters with input from the AES.</p> <p>Invite raters and remind them as necessary.</p> <p>Arrange to discuss the findings with the AES.</p>	<p>Review</p>	<p>Review suggested list of raters and approve.</p> <p>Complete MSF. Review MSF and discuss findings.</p>

<b>Observation of teaching</b>	Teaching may be observed in a variety of settings such as one-to-one, tutorials, lectures or workshops.	<p>Invite another teacher to attend teaching session.</p> <p>Complete assessment of teaching form. Teaching undertaken that has not been observed can also be recorded in 'other evidence' under the 'teaching sessions' heading.</p>		Review
<b>Assessment of Audit (AoA)</b>	<p>There should be a minimum of 1 completed audit project per year. The completed presentation with outcomes should be uploaded on ISCP.</p> <p>Aim to have an 'Assessment of Audit' WBA as evidence.</p>	<p>Record all ongoing projects in the 'other evidence' section under the audit heading.</p> <p>Upload audit presentation Request feedback.</p> <p>Complete assessment of audit form.</p>	Review	Review planned audits and progress.
<b>Exam results</b>	This is important in orthodontics as the number of minimum WBA is low compared to other specialties, but this is also due to the inclusion of other assessments throughout the 3-year period of training, including the 2 OCPs during ST2 and ST3, respectively.	Record all academic assessments and exam results in other evidence section under the exam heading.		Review and discuss findings.

<b>Orthodontic Research Assessment System (ORAS)</b>	A progress report by the research supervisor should be available for every RCP.	Record details of research study in the 'other evidence' section under the research heading.	Review	Review
<b>Orthodontic Log Book Assessment Toolkit (OLAT)</b>	The OLAT word document and Logbook calculator have been developed by the SAC. Please include the correct ST level on the form. The OLAT should be completed and updated for every RCP.	Complete OLAT word document in full and send to AES prior to meetings.  The OLAT should be completed and uploaded to the other evidence section of the portfolio under the miscellaneous heading.	Review	Review at each meeting  Review for RCP
<b>Orthodontic Case Presentations (OCP)</b>	The OCP word document has been developed by the SAC as a means of assessing case progression <b>Year 2:</b> two cases to be written up using the template and assessed using standard CBD criteria <b>Year 3:</b> four cases to be written in full (these can include the two from year 2) and two assessed using standard CBD criteria	Over the three year programme the trainee will need to produce evidence of assessment of four treated cases. The outcome of the assessments should be uploaded to other evidence under miscellaneous heading.	Arrange for assessment of OCPs to take place within training programme, prior to the ARCP in Year 2 and Year 3	Review selection of OCPs.

<b>Clinical supervisor comments and concerns</b>	It is essential that the Clinical Supervisors comment on their training on a regular basis (ideally comments should be added once per month of training). A final AES report will not be able to be generated until sufficient comments are available.	Remind clinical supervisors to record any comments on the ST's training and progress, CS comments are especially valuable when associated with a particular clinical encounter which has been a positive learning experience rather than a generic comment on progress.	Review	Review and discuss findings
<b>Other evidence</b>	<p>Details of awards, prizes, courses attended, e-learning, exams, external conferences, meetings attended or chaired, internal meetings attended, teaching (seminar programme), patient feedback, positions of responsibility, presentations, projects, publications and research, teaching sessions, records of critical or significant events are useful evidence to give the RCP panel a broader picture of the training that has been undertaken and the opportunities that have been provided.</p> <p><b>Form R</b> should also be uploaded to this section of the portfolio under the miscellaneous heading. A new form R is required for each RCP.</p>	Upload in other evidence under the appropriate heading. Ideally do this chronologically and as it is acquired.		Review evidence section at meetings and discuss findings