**Appendix 2: Trainee Meeting Pro-Forma (Peninsula)**

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| **Support & Performance Unit pro-forma for trainee meetings** |
| **Trainee Name:**  |  | **Specialty:** |  |
| **Base Hospital:** |  | **Current year of training:** |  |
| **Date:**  |  | **Deanery Supervisor:** |  | **Notes taken by:** |  |
| **Reasons for review/ meeting:** |
|  |
| Last ARCP outcome: |
| ARCP History**:** |
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| **Mitigating circumstances:** |
| Personal: |
|  |
|  |
| Health:  |
|  |
|  |
| **Training issues:** |
| General: |
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|  |
| Educational supervision: |
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|  |
| Clinical exposure/clinical supervision: |
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| **Training issues contd.:** |
| Formal teaching: |
|  |
| Informal teaching: |
|  |
| Other: |
|  |
| **Plans:** |
| General: |
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|  |
|  |
| Timescale proposed at ARCP: |
| Is timescale appropriate? |
|  |
| **Additional support:** (OH, Coaching, Counselling, Mentoring, Career Planning) |
| Has support been offered? Is support needed? |
|  |
|  |
|  |
| **Length of extension:** |
| How long? |
| Appropriate review in place? |
| Does trainee understand limits of extension of training? |
| **Actions:** |
| 1. Discuss at Support and Performance meeting?
 |
| 1. Communication with TPD, ES, School Manager Etc.?
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| 1. Other?
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