Counting experience prior to entry into a CCT training programme in Anaesthetics

**Gap Analysis Framework**

**Section 1: Anaesthetist in training personal details**

|  |  |
| --- | --- |
| Name | Click or tap here to enter text. |
| GMC Number, or | Click or tap here to enter text. |
| College Reference Number | Click or tap here to enter text. |
| GMC license to practice renewal date | Click or tap to enter a date. |
| Revalidation date | Click or tap to enter a date. |
| Are you up to date with revalidation requirements? | Choose an item. |

**Section 2: Training to date**

|  |  |
| --- | --- |
| National Training Number | Click or tap here to enter text. |
| Programme | Click or tap here to enter text. |
| Current Stage / year of training | Click or tap here to enter text. |
| Exams already completed, with date of completion | Click or tap here to enter text. |
| Exams planned, with anticipated date | Click or tap here to enter text. |
| Date of most recent ARCP or review | Click or tap to enter a date. |
| Outcome of most recent ARCP or review | Click or tap here to enter text. |
| List goals following most recent ARCP or review | Click or tap here to enter text. |

**Section 3: Out of programme/experience information**

|  |  |
| --- | --- |
| Type of non-training placement | Click or tap here to enter text. |
| Stage / year of training at beginning of OOP/experience | Click or tap here to enter text. |
| Duration of OOP/experience for review | Click or tap here to enter text. |
| **Experience gained during OOP/experience** | |
| Description of clinical activity undertaken - general | Click or tap here to enter text. |
| Description of professional activity undertaken | Click or tap here to enter text. |
| Logbook of clinical skills, technical skills | Click or tap here to enter text. |
| Degree of supervision (proportion direct/indirect) | Click or tap here to enter text. |
| Name of supervisor(s) (equivalent to Educational Supervisor) | Click or tap here to enter text. |
| Position of supervisor(s) | Click or tap here to enter text. |
| Qualifications of supervisor(s) | Click or tap here to enter text. |
| CPD undertaken | Click or tap here to enter text. |
| Date of appraisal (if applicable) during OOP/experience | Click or tap to enter a date. |
| Outcome of appraisal (if applicable) during OOP/experience | Click or tap here to enter text. |
| ES / CS reports | Click or tap here to enter text. |

**Section 4: Outcome of gap analysis**

|  |  |
| --- | --- |
| Details of training/curriculum requirements completed during OOP/experience which the applicant wishes to be counted | Click or tap here to enter text. |
| Time to be counted towards CCT date based on OOP/experience (maximum 12 months) | Click or tap here to enter text. |
| Stage at which time to be counted towards based on OOP/experience | Click or tap here to enter text. |
| Remaining training requirements to complete stage of training | Click or tap here to enter text. |
| Additional requirements identified by gap analysis to support level planned on return? | Click or tap here to enter text. |