

# Personal Training File

(Trainee's Log Book)

Trainee's name

# Contents

### Section I – Introducing the 'Trainee's Log Book'

- I.I Introduction to trainees, Educational Supervisors and College Tutors
- 1.2 Check-list for individual training posts
- 1.3 Record form for training post
- 1.4 Summary of posts relevant to MRCPsych

#### Section 2 – Trainee's log forms

- 2.1 Courses attended
- 2.2 Research experience
- 2.3 Audit experience
- 2.4 Publications
- 2.5 Presentations
- 2.6 Administrative experience
- 2.7 Teaching experience
- 2.8 Miscellaneous experience ECT, interview skills, personal safety, assessment of deliberate self-harm, teaching in examination techniques, updating CPR skills
- 2.9 Experience in dynamic psychotherapy
- 2.10 Experience in cognitive—behavioural psychotherapy
- 2.11 Other psychotherapy experience
- 2.12 Experience/information not otherwise mentioned

#### Section 3 – Feedback

- 3.1 Copies of consultant's progress reports
- 3.2 Trainee's feedback form

#### Section 4 – Trainee's CV

4.1 Keep a regularly updated copy of your curriculum vitae here

#### Notes

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# I.I Introduction to trainees, Educational Supervisors and College Tutors

#### To trainees

This personal training file ('log book') has been developed by the College as a means of helping you and your trainers to review the progress of your training. You will keep this log book and it is your responsibility to maintain it. It should help in assessment of your particular training needs and will be very useful when preparing job applications and updating your CV (a copy of which should be kept in this file). This log book should be made available to your Educational Super-visor and College Tutor as necessary. Although every effort has been made to make the log book as flexible as possible, certain sections may need modification for your particular use. Make use of the reverse of the printed pages as necessary if there is insufficient room in some sections.

This is not a intended to be a comprehensive source of information about training. Your local scheme should have a prospectus detailing posts available, teaching timetables, etc. The College's Examinations Department can supply advice and information on examination regulations, reading lists, etc. and may be contacted through the College switchboard on 0171 235 2351. An excellent way to keep in touch with the College and receive the *British Journal of Psychiatry* is to apply to become an Inceptor – your local College Tutor can advise on this.

**Psychotherapy experience** (sections 2.9–2.11) – this section of the log book is not intended to constitute a comprehensive psychotherapy log. College guidelines are available (e. g. *Psychiatric Bulletin*, November 1993, vol.17, p. 695). Sound clinical supervision is emphasised and a minimum of one long and two brief cases (10 sessions) in both dynamic and cognitive—behavioural therapy is suggested. **Further copies of the record forms will be available from your Tutor.** 

#### To Educational Supervisors

It is suggested that you ask to review this document with the trainee at the start and towards the end of their attachment. This should help to establish the important training needs and educational objectives that the trainee will be addressing in their time with you. The College's guidance on approval for posts stipulates that trainees should receive a minimum of one hour per week face-to-face supervision with their consultant (which should be over and above basic clinical supervision of patients on the firm). The log book may usefully be used to set areas for discussion and tuition in these sessions.

### To College Tutors

Trainees will find it helpful to have copies of their appraisal forms (consultant's feedback – section 3.1) in th is file. Tutors are asked to ensure that (where applicable) arrangements are made to ensure that trainees receive copies of these for inclusion. The log book has been designed to cover the key areas of training and to be as adaptable as possible to different training circum stances. Local schemes are welcome to make additions as they see fit, however, for particular needs, and may wish to make some modification, for example, to the way that progress in specific posts is recorded, and how feedback from Educational Supervisors is documented.

The acquisition of general clinical skills is of central importance in training. The considerable space allocated in this file for recording specialist, research and other experience should not be taken as an indication that these should take undue precedence over the development of generic psychiatric and appropriate general medical skills.

### 1.2 Check-list for individual training posts

A record form (section 1. 3) should be filled out for each training post. Further blank copies will be available from your Tutor. The **educational objectives** to be achieved should be discussed at the start of the attachment and agreed between the trainee and the Educational Supervisor. These are largely discretionary, but as a guideline the following check-list may be useful as a prompt for agreeing objectives appropriate to a particular stage of training and subspeciality. Some of the College's mandatory requirements are included, but at this stage the lists are intended to be neither prescriptive, nor necessarily comprehensive. Colleagues are referred to the *Basic Sciences and Clinical Curricula for the MRCPsych*, available from the Examinations Department, for details of training standards and proposed curricula.

#### Generic

- History taking
- Mental state assessment
- Case presentation

- Knowledge and implementation of the Mental Health Act
- Care Programme Approach
- Approach to and experience in multi-disciplinary working
- · Risk assessment for dangerous and self-injurious behaviour
- Undertaking domiciliary assessments
- Basic pharmacotherapy
- Basic and brief counselling approach
- Physical assessment
- Keeping case notes and defensible documentation

### Old age psychiatry

- Extended cognitive state examination
- Assessing and addressing carers' needs
- Home assessment and follow-up
- · Assessment of organic and functional illness in old age
- Knowledge of community services

### Child and adolescent psychiatry

- Interviewing and assessing families Knowledge of early development and attachments (and their relationships to adult adjustment and disorder)
- Assessment approach to children and adolescents
- Family therapy as a team member
- Experience of play, behavioural and other therapies in children
- Child protection issues
- Assessment of deliberate self-harm in children
- Role of drug therapy

#### Forensic and special care

Management of disturbed patients in a secure setting Assessment of prisoners in a remand setting Knowledge of forensic sections of the Mental Health Act Preparation of court reports Criteria for admitting patients to secure care Attendance at court – witness skills Visits to a range of secure facilities Further assessment of dangerousness

### Learning disability

Interviewing and assessing the learning disabled Community management Supportive family work Knowledge of medical aspects/associations of learning disability Knowledge of psychological/behavioural aspects Management of organic psychosis, chronic epilepsy, sex offenders

#### Addictions

Management of detoxification Mental state examination in substance misusers Use of sensitising and antagonist drugs Knowledge of harm reduction and substitute prescribing Use of specific therapies (e. g. behavioural, motivation enhancement) Use of other agencies/disciplines

### Liaison psychiatry

- · Assessment of psychiatric and physical comorbidity
- Assessment of unexplained physical symptoms
- Crisis management
- Assessment of deliberate self-harm
- Joint working with other specialities
- Psychiatric treatments in special settings
- The Mental Health Act in the general hospital

### Rehabilitation psychiatry

- Assessment for suitability
- Use of assessment scales/questionnaires
- Knowledge of community services
- Awareness of carer issues
- Behavioural management
- Management of treatment-resistant psychosis
- Undertaking long-term, continuing-care needs

To be completed by trainee with Educational Supervisor early in the attachment, with regular review

Post (specify subspeciality)	Sta	ırt d	: date		
Educational Supervisor			Enc	d date	
Educational objectives			Agr	reed attainment (circle one)	
	Α	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
Other experience (including patients for specific therapy)	and	coi	nme	ents	
Topics covered in supervision					
Weekly day and time of supervision					

- A Satisfactory attainment, 'fine tuning' only needed
- B Satisfactory but would benefit from additional experience in later posts
- C Referred insufficient experience/exposure available in current post
- D Referred further development needed

To be completed by trainee with Educational Supervisor early in the attachment, with regular review

Post (specify subspeciality)	Sta	art d	date	
Educational Supervisor			End	d date
Educational objectives			Agı	reed attainment (circle one)
	A	В	С	D
	A	В	С	D
	A	В	С	D
	A	В	С	D
	A	В	С	D
	A	В	С	D
	A	В	С	D
	A	В	С	D
Other experience (including patients for specific therapy) and comments				
Topics covered in supervision				
Weekly day and time of supervision				

- A Satisfactory attainment, 'fine tuning' only needed
- B Satisfactory but would benefit from additional experience in later posts
- C Referred insufficient experience/exposure available in current post
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To be completed by trainee with Educational Supervisor early in the attachment, with regular review

Post (specify subspeciality)	Sta	ırt d	date		
Educational Supervisor			Enc	l date	
Educational objectives			Agr	reed attainment (circle one)	
	A	В	С	D	
	Α	В	С	D	
	Α	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
Other experience (including patients for specific therapy) and comments					
Topics covered in supervision					
Weekly day and time of supervision					

- A Satisfactory attainment, 'fine tuning' only needed
- B Satisfactory but would benefit from additional experience in later posts
- C Referred insufficient experience/exposure available in current post
- D Referred further development needed

To be completed by trainee with Educational Supervisor early in the attachment, with regular review

Post (specify subspeciality)	Sta	ırt d	t date		
Educational Supervisor			Enc	d date	
Educational objectives			Agr	reed attainment (circle one)	
	A	В	С	D	
	Α	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
Other experience (including patients for specific therapy)	and	coi	nme	ents	
Topics covered in supervision					
Weekly day and time of supervision					

- A Satisfactory attainment, 'fine tuning' only needed
- B Satisfactory but would benefit from additional experience in later posts
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To be completed by trainee with Educational Supervisor early in the attachment, with regular review

Post (specify subspeciality)	Sta	ırt d	rt date		
Educational Supervisor			Enc	d date	
Educational objectives			Agı	reed attainment (circle one)	
	A	В	С	D	
	Α	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
Other experience (including patients for specific therapy) and comments					
Topics covered in supervision					
Weekly day and time of supervision					

- A Satisfactory attainment, 'fine tuning' only needed
- B Satisfactory but would benefit from additional experience in later posts
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To be completed by trainee with Educational Supervisor early in the attachment, with regular review

Post (specify subspeciality)	Sta	ırt d	: date		
Educational Supervisor			Enc	d date	
Educational objectives			Agr	reed attainment (circle one)	
	Α	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
	A	В	С	D	
Other experience (including patients for specific therapy)	and	coi	nme	ents	
Topics covered in supervision					
Weekly day and time of supervision					

- A Satisfactory attainment, 'fine tuning' only needed
- B Satisfactory but would benefit from additional experience in later posts
- C Referred insufficient experience/exposure available in current post
- D Referred further development needed

# I.4 Summary of posts relevant to MRCPsych

Trainee's name:			Date of b	rth:				
Date of start as SI	HO:		С	ontract expiry due:				
Date of start as R	egistrar (if applicable	e):	Contract expiry due:					
Summary of pos	ts relevant to MF	RCPsych						
No. Gra	ade Start d	ate	End date	Speciality	Consultant			
I								
2								
3								
4								
5								
6								
7								
8								
9								
10								
П								
12								
Progress in mem	bership							
MRCPsych part I								
Date eligible	Attempt I	Attempt 2	Attempt 3	Attempt 4	Passed			
MRCPsych part I	ı							
Date eligible	Attempt I	Attempt 2	Attempt 3	Attempt 4	Passed			
Outcome			Superviso	r				

# I.4 Summary of posts relevant to MRCPsych

Trainee's name:			Date of birth:					
Date of start as S	HO:		C	Contract expiry due:				
Date of start as R	egistrar (if applicable	e):	Contract expiry due:					
Summary of pos	ts relevant to MR	RCPsych						
No. Gr	ade Start da	ate	End date	Speciality	Consultant			
I								
2								
3								
4								
5								
6								
7								
8								
9								
10								
П								
12								
Progress in mem	bership							
MRCPsych part	ı							
Date eligible	Attempt I	Attempt 2	Attempt 3	Attempt 4	Passed			
MRCPsych part	II							
Date eligible	Attempt I	Attempt 2	Attempt 3	Attempt 4	Passed			
Outcome			Superviso	or				

### 2.1 Courses attended

### Membership preparation course \*

, , ,				
Date of start	Completed year I (tick)	Year 2	Year 3	Year 4
Course title:				
Module	Dates of ex-	aminations	Examination	results
I				
2				
3				
4				
Comments:				
Master's, psychotherapy or	other courses			
Course title			Dates	
I				
2				
3				
4				
5				
6				
7				
8				
Comments:				
* Where Membership course is a	combined with Master's, record both	n here.		

# 2.2 Research experience

### Principal research interest or Master's dissertation

Areas of potential interes	st:			
Subject of protocol:				
Dates of:				
Protocol approval	Data collected from	to	Work submitted	
Research methodology	teaching/courses			
Other research involve	ement			
Specify dates, topics, coll	aborators/supervisors:			

# 2.3 Audit experience

### Meetings attended

Date	Topic
Projects undertaken/involved wi	th
Date	Topic, collaborators/supervisors
Audit ideas	

## 2.4 Publications

Specify full references locating all publications in date order

### 2.5 Presentations

Date	Subject	Audience

# 2.6 Administrative experience

Representation on committees

Date start	Date end	Committee
Organisational res	ponsibilities	

# 2.7 Teaching experience

Date	Subject	Audience
to		
to		
to		
to		
to		
to		
to		
to		
to		

# 2.8 Miscellaneous experience

### ECT

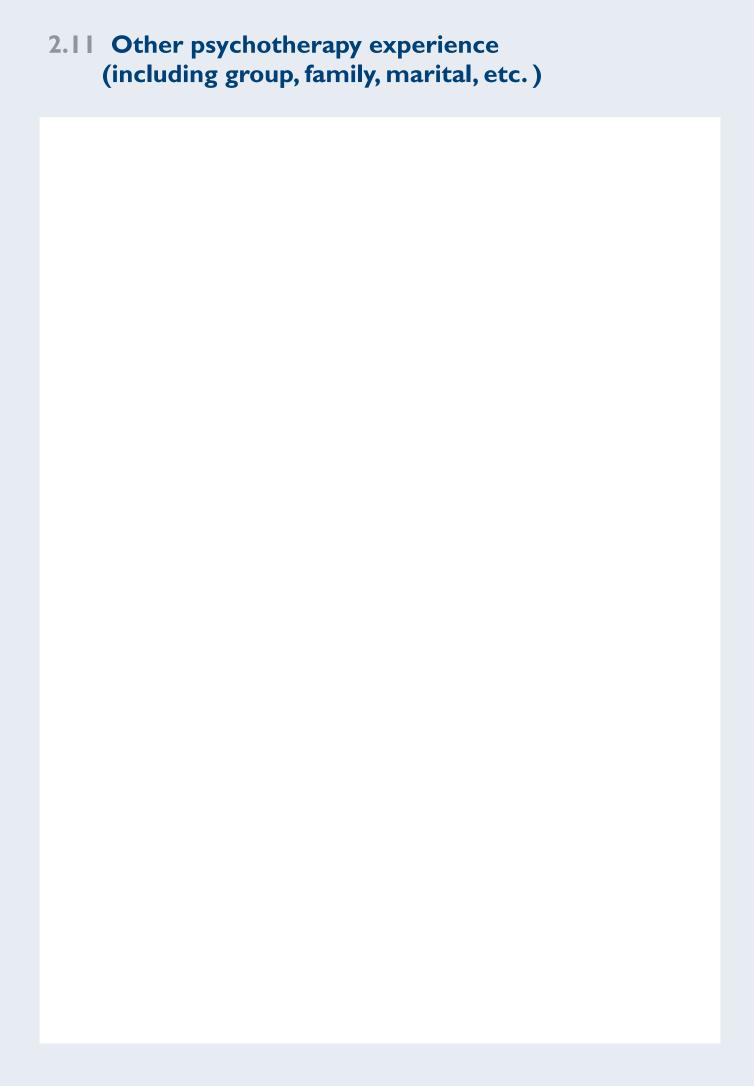
Date(s) attended te	aching in principles and	practical	administ	ration:				
Treatment sessions a	administered (tick):		2	3	4	5	6	
Interview skills tro	aining							
Dates	Methods					Supe	rvisor(s)	
Personal safety a	nd managing violend	ce						
Dates	Methods					Supe	rvisor(s)	
Assessment of del	iberate self-harm							
Dates	Methods					Supe	rvisor(s)	
Teaching in exam	ination technique							
Dates	Methods					Supe	rvisor(s)	
Updating cardiop	ulmonary resuscita	tion skil	lls					
Dates	Methods					Supe	rvisor(s)	

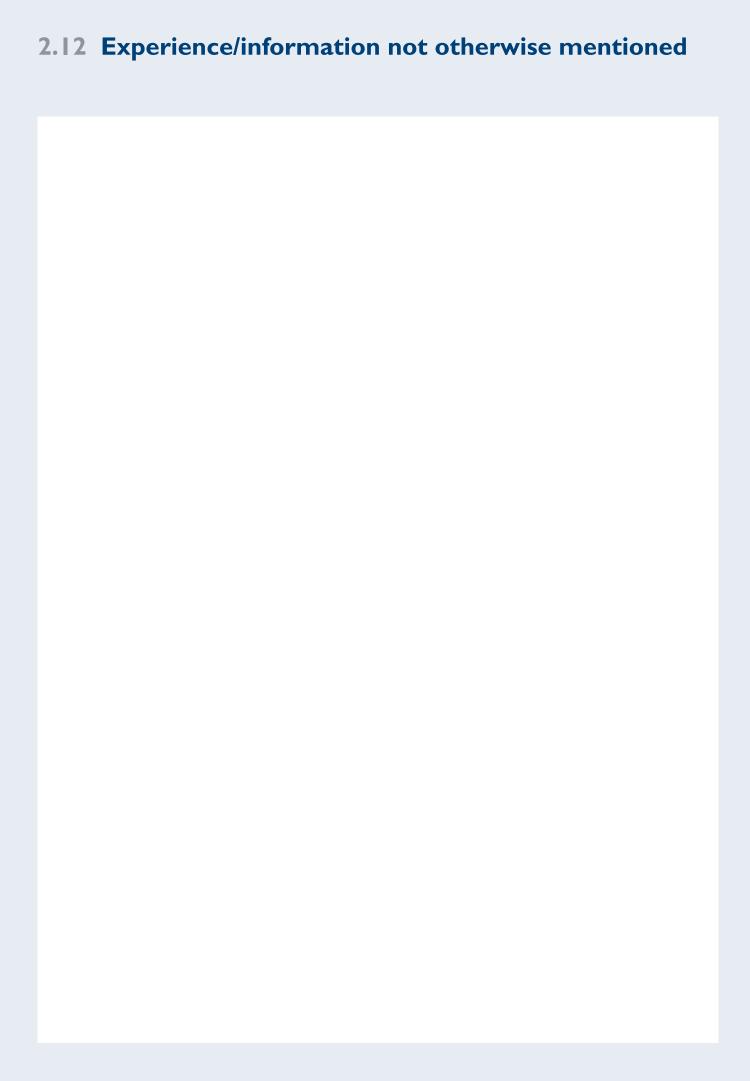
# 2.9 Experience in dynamic psychotherapy

Case number/identifier		Start date
Age	Gender	End date
Mode of therapy		
Session frequency		Total no. of sessions
Diagnosis		
Brief description of problem		
Treatment strategies		
Outcome		Supervisor
Case number/identifier		Start date
Case number/identifier  Age	Gender	Start date  End date
	Gender	
Age	Gender	
Age  Mode of therapy	Gender	End date
Age  Mode of therapy  Session frequency	Gender	End date
Age  Mode of therapy  Session frequency  Diagnosis	Gender	End date
Age  Mode of therapy  Session frequency  Diagnosis	Gender	End date
Age  Mode of therapy  Session frequency  Diagnosis	Gender	End date
Age  Mode of therapy  Session frequency  Diagnosis	Gender	End date
Age  Mode of therapy  Session frequency  Diagnosis	Gender	End date

# 2.10 Experience in cognitive-behavioural psychotherapy

Case number/identifier		Start date
Age	Gender	End date
Mode of therapy		
Session frequency		Total no. of sessions
Diagnosis		
Brief description of problem		
Treatment strategies		
Outcome		Supervisor
Case number/identifier		Start date
Case number/identifier  Age	Gender	Start date  End date
	Gender	
Age	Gender	
Age  Mode of therapy	Gender	End date
Age  Mode of therapy  Session frequency	Gender	End date
Age  Mode of therapy  Session frequency  Diagnosis	Gender	End date
Age  Mode of therapy  Session frequency  Diagnosis	Gender	End date
Age  Mode of therapy  Session frequency  Diagnosis	Gender	End date
Age  Mode of therapy  Session frequency  Diagnosis  Brief description of problem	Gender	End date
Age  Mode of therapy  Session frequency  Diagnosis	Gender	End date





# 3 Copies of consultant's progress reports

Mode of therapy	
Start date	End date
Session frequency	Total no. of sessions
Brief description of problem	
Treatment strategies	
nearment strategies	
Outcome	Supervisor
Mode of therapy	
Start date	End date
Session frequency	Total no. of sessions
Brief description of problem	
Treatment strategies	
Treatment strategies	
Outcome	Supervisor

Trainees are *not* expected to show Educational Supervisors copies of appraisal forms filed here for other posts they have occupied. If trainees *choose* to show their current consultant previous feedback reports, they may naturally do so at their own discretion. However, consultants should respect that fact that these represent confidential documents. Trainees and Tutors should consider how any necessary information regarding progress in previous posts is communicated to current Educational Supervisors.

# Specimen appraisal form (progress report by consultant) – may be modified for particular schemes

Trainee name		Grade	
Speciality		Consultant	
Period reported		From	to
Clinical skills	(e. g. judgement, empathy, histor relations with patients/relatives,		
Academic ability	(interest, knowledge of literature involvement in case conferences		S,
Relations with staff/other agencies	quality of personal relationships, (and consultation with GPs and o		cation

# 3.1 Specimen consultant's appraisal form

Administrative ability (reliability, responsibility, quality of case notes, etc.)	
A consideration of the constant	
Areas of progress during placement	
Areas of concern	
Psychotherapy experience	
Specific case allocated in placement? YES/NO	
If so, modality of therapy	
Comments on progress	
Ability and willingness to take advice	
Signed by trainee:	Date
Signed by consultant:	Date

A copy of this form will be sent to the trainee unless otherwise instructed

### 3.2 Trainee's feedback form

Please complete and return this form when requested by the Postgraduate Educational Services Department of the College, or the Collegiate Trainees' Committee. You may wish to enter comments or problems as you go along.

Year of birth	Scheme
Grade	Date
How long have you been using the log	book?
What problems have you found in usin	ng the log book?
Problem I:	
Problem 2:	
Problem 3:	
Problem 4:	
Problem 5:	
Problem 6:	
Problem 7:	
Problem 8:	
On a scale of I (no good) to 4 (excelle	ent) is the log book useful? (enter score):
On a scale of I (no good) to 4 (excelle	ent) is the log book usable? (enter score):
General comments	

## 4.1 Trainee's CV

Trainees should ensure that they keep an updated copy of their curriculum vitae in this section of the log book

# Notes