

Example of an Experiential Learning Event (ELE)

Potential adverse intrapartum event: lesson learned Learning Event Log

Note that you must complete a reflection log to be able to claim 2 credits for an Experiential Learning Event (1 credit for the Learning Event and 1 credit for the reflection)

2. Learning Event

This example represents just one individual approach to reflection and action. You can and should use your own style to engage in this process.

What is the title of this Learning Event?	Potential adverse intrapartum event: lesson learned		
When did you complete this Learning Event?	XX.XX.XXXX		
What was the duration of this Learning Event?	N/A		
Describe this Learning Event			
Which Dimension is this Learning Event linked to?	Professional	Clinical ✓	Extended Role
What type of Learning Event is this?	Formal	Experiential* ✓	Specific
Link to Practice and Roles	Acute obstetrics – Labour Ward sessions		
Link to Personal Learning Plan	Maintain core labour ward skills		
Link to GMC Domains of GMP (optional)	Domain 2: Safety and Quality		
Do you want to upload evidence?	Yes	Not now ✓	
Do you want to complete a Reflective Log? (optional for FLE/SpLE – mandatory for ELE)	Yes (Mandatory for ELE)	Not now	

Do you want to complete an Action Log?	Yes <input checked="" type="checkbox"/>	Not now
What is the Credit Value of this Learning Event?	N/A (Credit allocated with Reflective Log)*	
SUBMIT		

*For all Experiential Learning Events, a Reflective Log is mandatory. Once you have completed the reflection, the CPD ePortfolio will allocate 2 CPD credits (1 credit to the Experiential Learning Event and 1 credit to the reflection for that event).

Reflective Log

3. Reflection

What prompted this Learning Event?

(You may wish to include reasons why you undertook it, what you wanted to achieve and, if it was planned, how it links to your PLP)

(Expanding text box)

I am a consultant obstetrician and gynaecologist.

I came on to an evening shift and an ST7 trainee provided a very detailed and confident assessment of the Labour Suite, indicating the only pressing concern was of a woman undelivered after 2 hours in the second stage and with an "unusual" Fetal head on vaginal examination. The ST7 had performed an intrapartum Ultrasound and confidently stated there was a Direct OA position. A trial of Forceps in theatre had been proposed and accepted. The patient was transferred and I assessed the case once anaesthesia had been achieved. The Fetal head had extensive caput but having felt the ears it was clear that this was an OP Brow presentation and the "odd mass" the Fetal nose. I performed an ultrasound and confirmed the spine was posterior but noticed the hyperextended neck gave the impression of an anterior spine attached to the head. Presumably this was what had led to the previous diagnosis. Vaginal delivery was not feasible and a full dilatation Caesarean performed after explaining the new findings and risk mindful of Montgomery.

What did you learn from this Learning Event?

(You may wish to include whether it achieved what you wanted to achieve, how it might be helpful in your future practice, and any plans for further development activity that has resulted from this learning)

(Expanding text box)

1. Intrapartum ultrasound is a potentially useful skill however like everything else it has pitfalls. It is evolving in our department as a common tool prior to assisted delivery.
2. "Fresh eyes" are important especially when clinical observations are unusual and diagnosis are confidently asserted.
3. Consultants still have a place at full dilatation delivery decisions.
4. Feedback to ST7 was delayed because of rota scheduling but welcome as supported by

	<p>images and conducted as a supported learning event.</p> <p>I will ask the Labour Ward Lead if Ultrasound can be added to our Basic Labour Ward Training syllabus for trainees and Consultants. I will participate in the training. Every now and then a case will remind you that Obstetrics will teach you something new.</p> <p>Learning needs</p> <ul style="list-style-type: none"> • Review the literature on intrapartum Ultrasound and how best to deliver an appropriate teaching package. • Presentation and teaching event with course evaluation form <p>By Autumn 20xx</p>	
Do you want to complete an Action Log?	Yes <input checked="" type="checkbox"/>	Not now <input type="checkbox"/>
Credit Value for this Reflective Log	2*	
SUBMIT		

*For all Experiential Learning Events, a Reflective Log is mandatory. Once you have completed the reflection, the CPD ePortfolio will allocate 2 CPD credits (1 credit to the Experiential Learning Event and 1 credit to the reflection for that event).

Action Log

4. Action

<p>What actions have resulted from this Learning Event? (You may wish to include a description of a change in your or your team's practice or confidence, a description of a specific situation when you applied what you learned, or further learning needs identified as a result of this learning)</p>	<p>Following on from this case I set out to develop a teaching session on the value and use of intrapartum USS. I reviewed the literature regarding the use of ultrasound in assessing position, but also in assessing progress in labour and predicting outcome of instrumental delivery. The literature was variable. I decided that at this stage I would focus just on teaching use of ultrasound to detect persistent OP position in labour, to complement digital examination. I proposed to the Labour Ward lead that this should be included in our regular update training in our unit for Consultants and trainees. I felt a presentation needed real cases and examples, so I spent time in my SPA sessions on Delivery Unit to gather cases. I needed to gain patient consent to use ultrasound images so I sought advice from our medicolegal team how to document this. I collected 5 examples of using ultrasound in labour to determine position and used these as basis for my half hour presentation. So far I have presented this on 2 of our update training half days. I encouraged discussion about the value of the use of ultrasound which has led to some interesting debate between those who are keen to use ultrasound and those who feel it does not add anything that an experienced practitioner cannot achieve. Participant feedback has been positive.</p>	
<p>Looking forward, what are your next steps? (You may wish to include further learning needs for you or your team as SMART objectives)</p> <p><i>Specific</i> <i>Measurable</i> <i>Achievable</i> <i>Realistic</i> <i>Timed</i></p>	<p>I am going to approach our regional trainee teaching lead to ask whether this would be useful to include in the regional teaching programme. The programme for this year is already underway so this would be an objective for the next year's teaching programme.</p>	
<p>Do you want to upload evidence?</p>	<p>Yes ✓ *</p>	<p>Not now</p>

Additional Credit Value for this Action Log*	Simple	Complex 2**
SUBMIT		

*Copy of presentation, no patient identifiers included

** I have claimed as Complex as preparation of the presentation took many hours both for literature review, and also to collect the cases and images to use for examples.