# ACCS EM Quick Guide

This is a brief guide to the requirements of CT1-3 in ACCS EM and should be enough to get you through ARCP. Obviously the ARCP checklists change sometimes, so always refer to the most up to date document from the Deanery, which can be found here:
https://www.yorksandhumberdeanery.nhs.uk/emergency_medicine/assessments/arcp/

The Deanery have been very clear that the checklist for ARCP requirements should be taken from their website (above) NOT the eportfolio or RCEM as these are slightly different. They also direct all trainees to the same page to check eportfolio lockdown dates before ARCP – you are not always emailed with this information until very near the time.

Included in the RCEM Curriculum (2015) there is a summary of Workplace Based Assessments and what RCEM expects you to do for each (found in the Assessment chapter). This can be found here:
https://www.rcem.ac.uk/docs/Training/RCEM_2015_Curriculum___Applicable_from_August_2016_ _approved_23_Nov_2015_ATCF_RTT_DRE-EM_additions_July2017%20- %20JCST%20amendments.pdf

There are some general tips at the end of the guide that are useful to all years of training.

## CT1

There are a minimum number of work-place based assessments (WBAs) that need to be completed in each of the acute medicine and emergency medicine blocks. These are shown below, as per the CT1 checklist:

**Record number of individual WBA assessments in each part of the rotation**

| Specialty | Mini-CEX | | DOPS | | CBD | | ACAT | |
|---|---|---|---|---|---|---|---|---|
| | Required | Completed | Required | Completed | Required | Completed | Required | Completed |
| Emergency Medicine | 4 | | 5 | | 3 | | 1 | |
| Acute Medicine | 3 | | 5 | | 3 | | 3 | |

However, this is not the whole story, as there are also minimum numbers of Core Major and Acute Presentations that need to be evidenced with WBAs:

**Summary Record of Major and Acute Presentations in CT/ST1**

| Specialty | Core Major Presentations | | Core Acute Presentations with WBA | | Core Acute Presentations with other evidence | | Total Core Acute Presentations | |
|---|---|---|---|---|---|---|---|---|
| | Required | Completed | Required | Completed | Required | Completed | Required | Completed |
| Emergency Medicine | 2 | | 10 | | 9 | | 38 | |
| Acute Medicine | 2 | | 10 | | 9 | | | |

So, at the end of CT1 you must have 4 (of 6) Core Major Presentations signed off with a WBA (this can be Mini-CEX or CBD), and 20 Core Acute Presentations (Mini-CEX/CBD/ACAT). The remaining Core Acute Presentations can be evidenced with e-learning/courses etc. It may be helpful at the beginning of the year to make a list of all of the Major and Acute presentations and record what WBAs you get alongside as you go so you are not short at the end of the year.

### Acute Medicine

- 2 x Core Major Presentations – evidence using Mini-CEX/CDB with a Consultant.  There are specific Mini-CEX assessments in the ePortfolio for each of the Major Presentations, but you can also use a Formative CBD assessment.
- 10 x Core Acute Presentations– evidence using Mini-CEX/CBD/ACAT with ST3+.  NOTE – you can link an ACAT with up to 5 different Core Acute Presentations.
- 9 other Core Acute Presentations – evidence with e-learning, reflections, teaching assessments or additional WBAs.
- 5 x Core Practical Procedures – evidenced using DOPS with ST3+. NOTE - Acute medicine is a good opportunity for some of the harder to achieve Core Procedural Competencies, such as 'pleural aspiration' and 'knee aspiration'. Several departments in the region run simulation sessions for these procedures and you can get a DOPS from simulation.

### Emergency Medicine

- 2 x Core Major Presentations– evidence using Mini-CEX/CDB with a Consultant. There are specific Mini-CEX assessments in the ePortfolio for each of the Major Presentations, but you can also use a Summative CBD assessment.
- 5 x specific Core Acute Presentations – evidence using Mini-CEX or CBD with a consultant.
    - Abdominal pain
    - Breathlessness
    - Chest pain
    - Head injury

- o   Mental health
- 5 x further Core Acute presentations – evidence using Mini-CEX or CBD with ST3+.
- 9 other Core Acute Presentations – evidence with e-learning, reflections, teaching assessments or additional WBAs.
- 5 x specific Practical Procedures – evidence using DOPS with ST3+.
    - o   Airway protection
    - o   Reduction of dislocation/fracture
    - o   Wound management
    - o   Trauma primary survey
    - o   Any 1 other procedure

### Other CT1 requirements

- Evidence of supervisor meetings with Educational and Clinical Supervisors at the beginning and end of each placement
- Structured training report x 2 – this should be done by your Educational Supervisor at the end of each placement. It needs to include a summary of the WBAs you have completed and several other categories. It is found under the Educational Supervision/Meetings tab.
- Common Competencies x 12 (minimum) signed off by Educational Supervisor to Level 2. NOTE for your supervisor to sign you off, you must have linked evidence for each competency (can be WBAs/elearning/reflection/audit etc) and recorded your own assessment of your competency. This has to be done for each competency, one at a time and takes a while!
- MSF x 2 – one for each placement.
- Record of the number of patients you have seen in ED during your 6 months placement. Usually this is available from the computer system used in the department and can be uploaded and clearly labelled in your Personal Library.
- Audit/QI project x 1. Evidence of this can be uploaded to Personal Library
- Teaching attendance – you have to attend 80% of the regional teaching days, which must include the CT1 Sim course.  You can save and upload certificates of attendance into your Personal Library.
- Current ALS certificate – ALS lasts 4 years, and you may be approaching 4 years since you last did ALS in F1/2. It is worth booking a re-validation course early as they get booked up. You can also start thinking about APLS/ATLS, which must both be completed by the end of CT3. The deanery will pay for all 3 courses for you.
- Safeguarding children Level  1+2 – this can be done on eLearning for Health (https://www.e-lfh.org.uk/ ), and the certificate uploaded to your Personal Library.
- Evidence and reflection on any complaints/serious events.
- Declare any sick leave in your ePortfolio.
- Form R submission – a From R (part B) must be completed (you can find it here on the Deanery website https://www.yorksandhumberdeanery.nhs.uk/anaesthesia/revalidation-and-form-r) and returned to emsupport.yh@hee.nhs.uk. You can also put a copy in your Personal Library.
- Feedback – during the year you will receive emails asking you to participate in HEE Yorkshire and Humber and GMC trainee surveys. You must complete these surveys and provide evidence that you completed them in your Personal Library. Often the best way to do this is to take and save a screen shot at the time of completion.
- Finally, a copy of the ARCP checklist, found on the deanery website (https://www.yorksandhumberdeanery.nhs.uk/emergency_medicine/assessments/arcp/), should be printed out, annotated with required details, signed by you educational supervisor, scanned and uploaded to your Personal Library.

## CT2

In my experience you may feel a bit forgotten in CT2 with little or no regional teaching and no contact with EM. Also the learning curve in Anaesthetics, especially during the first 3 months, is steep. However, generally people seem to enjoy the year and I learnt lots of skills to bring back to ED.

The specific numbers of WBAs that must be completed during CT2 are covered below under the anaesthesia and ICM headings but bear in mind that by the end of the year you must have:

- o All 6 Core Major Presentations signed off - evidenced with Mini-CEX or CBD by a Consultant)
- o 21 of 27 Core Practical Procedures – evidenced with DOPS or ES sign off

### ICM

- 11 x Intensive Care Medicine competencies – evidenced with Mini-CEX, CBD or DOPS. Some departments want these to be done with consultants, some are more relaxed. All 11 competencies have to also be signed off by your Clinical Supervisor at the end of the placement.
- Logbook of procedures – this can be recorded in your ePortfolio in the Logbook of Procedures (under the Reflection tab). Many computer systems used in ITU will provide a log which can be uploaded to your Personal Library.

### Anaesthetics

The anaesthetics placement is quite assessment heavy, particularly in the first 3 months.

- Logbook – you must keep a record of each patient and their anaesthetic, procedures etc. There are lots of Apps you can use, I found FileMaker GO with a specific anaesthetic database pre-loaded useful, but there are other options. Start your logbook as soon as you begin anaesthetics, otherwise it is painful to catch up later.
- Initial Assessment of Competences (IAC) – use the specific Anaesthetic A-CEX/DOPS/CDBs in the ePortfolio
    - o 5 x A-CEX
    - o 6 x DOPS
    - o 8 x CBD

    See table below:

## Assessments to be used for the Initial Assessment of Competence

### A-CEX

| Assessment Code | Assessment |
|---|---|
| IAC_A01 | Preoperative assessment of a patient who is scheduled for a routine operating list [not urgent or emergency] [0-3 months] |
| IAC_A02 | Manage anaesthesia for a patient who is not intubated and is breathing spontaneously [0-3 months] |
| IAC_A03 | Administer anaesthesia for acute abdominal surgery [0-3 months] |
| IAC_A04 | Demonstrate Rapid Sequence Induction [0-3 months] |
| IAC_A05 | Recover a patient from anaesthesia [0-3 months] |

### DOPS

| Assessment Code | Assessment |
|---|---|
| IAC_D01 | Demonstrate functions of the anaesthetic machine [0-3 months] |
| IAC_D02 | Transfer a patient onto the operating table and position them for surgery [lateral, Lloyd Davis or lithotomy position] [0-3 months] |
| IAC_D03 | Demonstrate cardio-pulmonary resuscitation on a manikin. [0-3 months] |
| IAC_D04 | Demonstrates technique of scrubbing up and donning gown and gloves. [0-3 months] |
| IAC_D05 | Basic Competencies for Pain Management – manages PCA including prescription and adjustment of machinery [0-3 months] |
| IAC_D06 | Demonstrates the routine for dealing with failed intubation on a manikin. |

### CBD

Examine the case-notes. Discuss how the anaesthetic plan was developed. Ask the trainee to explain their approach to pre-op preparation, choice of induction, maintenance, post op care. Select one of the following topics and discuss the trainees understanding of the issues in context.

| Assessment Code | Assessment |
|---|---|
| IAC_C01 | Discuss the steps taken to ensure correct identification of the patient, the operation and the side of operation |
| IAC_C02 | Discuss how the need to minimise postoperative nausea and vomiting influenced the conduct of the anaesthetic |
| IAC_C03 | Discuss how the airway was assessed and how difficult intubation can be predicted |
| IAC_C04 | Discuss how the choice of muscle relaxants and induction agents was made |
| IAC_C05 | Discuss how the trainee's choice of post-operative analgesics was made |
| IAC_C06 | Discuss how the trainee's choice of post-operative oxygen therapy was made |
| IAC_C07 | Discuss the problems emergency intra-abdominal surgery causes for the anaesthetist and how the trainee dealt with these |
| IAC_C08 | Discuss the routine to be followed in the case of failed intubation. |

- IAC sign off – you must ask your Clinical supervisor to sign off each competency (this can be done at your end of placement meeting). You also have to get an Anaesthetic Initial Assessment of Competence WBA signed off by 2 consultants (usually Clinical Supervisor and one other). This can be found in same place as DOPS/CBDs etc in the ePortfolio.
- Introduction to Anaesthesia or Basis of Anaesthetic practice – NOTE this is different to the IAC. There are several more competencies, many of which you can use the IAC assessments you have already completed as evidence for. There are also e-learning modules on eLfH (https://www.e-lfh.org.uk/ ) that cover most of the topics. You must ask your Clinical Supervisor to sign these off as well.

## Other CT2 requirements

- Evidence of supervisor meetings with Educational and Clinical supervisors at the beginning and end of each placement
- Structured training report x 2 – this should be done by your Educational Supervisor at the end of each placement
- MSF x 2 – one for each placement
- Audit/QI project x 1. Evidence of this can be uploaded to Personal Library
- Teaching attendance – you have to attend 60% of Anaesthetic and ICM teaching. If no formal teaching record is held, then you can make a list of teaching attended yourself and upload it to your Personal Library.
- Safeguarding children Level  1+2 – this can be done on eLearning for Health, and the certificate uploaded to your Personal Library.
- Evidence and reflection on any complaints/serious events

- Declare any sick leave in your ePortfolio
- Form R submission – a From R (part B) must be completed (you can find it here on the Deanery website https://www.yorksandhumberdeanery.nhs.uk/anaesthesia/revalidation-and-form-r) and returned to emsupport.yh@hee.nhs.uk. You can also put a copy in your Personal Library
- Feedback – during the year you will receive emails asking you to participate in HEE Yorkshire and Humber and GMC trainee surveys. You must complete these surveys and provide evidence that you completed them in your Personal Library. Often the best way to do this is to take and save a screen shot at the time of completion.
- Finally, a copy of the ARCP checklist, found on the deanery website (https://www.yorksandhumberdeanery.nhs.uk/emergency_medicine/assessments/arcp/), should be printed out, annotated with required details, signed by you educational supervisor, scanned and uploaded to your Personal Library.
- NOTE – the current CT2 checklist on the Deanery website states you must attend a 'Critical Incident Course' – it was not organised this year (2018/19) and did not seem to affect ARCP outcomes.

The WPB assessments in CT3 are split into Adult and Paediatric Competencies. There are additional elements to ARCP including Management and Leadership items, completing the FRCEM Intermediate and holding current ALS/APLS/ATLS certificates.

It is also useful to know that you need to add the CT3 curriculum to your ePortfolio as it does not seem to update automatically. To do this go to the 'Curriculum' tab, then 'Edit Curriculum' and you can add the CT3 Curriculum and the Management Curriculum to your ePortfolio manually.

**Paediatric Emergency Medicine**

- 6 x Paediatric Major Presentations – evidence with Mini-CEX/CBD with consultant or equivalent (eg. associate specialist). The Anaphylaxis and Cardio-respiratory arrest assessments can be in simulation.
- 5 x specific Paediatric Acute Presentations – evidence with Mini-CEX/CBD with a consultant or equivalent. The 5 assessments must cover:
    - o Abdominal pain
    - o Breathing difficulties
    - o Concerning presentations (CBD)
    - o Fever in all age groups
    - o Pain in children
- 14 x Paediatric Acute Presentations – evidence using Mini-CEX/CBD with ST3+, elearning, reflections, teaching sessions etc
- 3 x specific Paediatric Practical Procedures – evidence using DOPS
    - o Venous access
    - o Airway assessment and maintenance
    - o Primary survey
- Logbook of number of patients seen – evidence can be uploaded to Personal Library and Educational Supervisor must add numbers to structured training report.


**Adult Emergency Medicine**

- 6 x Resuscitation WBA – evidence using Mini-CEX/CBD with consultant or equivalent (minimum 3 Mini-CEX)
    - o At least 1 Major Trauma assessment
- Extended Structured Learning Event (ESLE) x 2 – must be with consultant or equivalent. There is no formal requirement, but most departments recommend you do these with 2 different consultants, ideally one with your clinical supervisor.
- Remaining Additional Adult Acute Presentations – evidenced by Mini-CEX/CBD with ST3+, teaching/audit assessments, elearning, reflections, teaching sessions etc.
- Logbook of number of patients seen – evidence can be uploaded to Personal Library and Educational Supervisor must add numbers to structured training report.


**Other CT3 requirements**

- Evidence of supervisor meetings with Educational and Clinical supervisors at the beginning and end of each placement

- Structured training report x 2 – this should be done by your Educational Supervisor at the end of each placement and should include number of cases seen in Paediatric and Adult placements
- Faculty Educational Governance Report for Adult EM – your Educational/Clinical Supervisors should ensure this is complete
- MSF x 2 – one for each placement
- Educational supervisor to sign off 23 of 25 Common Competences at Level 2 competent. You need to add evidence and sign yourself as Level 2 competent as well.
- Audit/QI project x 1. Evidence of this can be uploaded to Personal Library
- Teaching attendance – you have to attend 60% of Anaesthetic and ICM teaching. If no formal teaching record is held, then you can make a list of teaching attended yourself and upload it to your Personal Library.
- Management and Leadership – minimum of one item in the Management Portfolio completed, a reflection written and CBD completed with Clinical Supervisor. More information on the Management Portfolio content can be found on the RCEM website (https://www.rcem.ac.uk/RCEM/Exams_Training/UK_Trainees/Management_Portfolio/RCEM/Exams_Training/UK_Trainees/Management_Portfolio.aspx?hkey=ffd77dcf-f7d2-43cd-bd33-db2f8e269a83)
- Complete FRCEM Intermediate examinations – certificate can be uploaded to Personal Library
- Up to date certificates for ALS/APLS/ATLS – uploaded to Personal Library
- Safeguarding children Level 3 – this can be done on eLearning for Health (https://www.e-lfh.org.uk/ ), and the certificate uploaded to your Personal Library.
- Evidence and reflection on any complaints/serious events
- Declare any sick leave in your ePortfolio
- Form R submission – a From R (part B) must be completed (you can find it here on the Deanery website https://www.yorksandhumberdeanery.nhs.uk/anaesthesia/revalidation-and-form-r) and returned to emsupport.yh@hee.nhs.uk. You can also put a copy in your Personal Library
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## General tips

- Several assessments can be linked to more than one Competence – for example several of the ICM specific Competencies are also found in the Core Procedural Competencies and the same assessment can be linked to both.
- Create folders in your ePortfolio Personal Library for each year of training. To these, you can add headings such as 'teaching', 'certificates', 'courses', 'feedback' etc and upload evidence into these
- I found it was worth trying to get exams done earlier rather than later, with the FRCEM Primary in CT1 and Intermediate in CT2. However, you have until the end of CT3 to compete both.
- In CT1 and CT3 there are lots of regional teaching days. Sign up as soon as you can and try to arrange study leave. Some departments are better than others at helping you to facilitate time off.