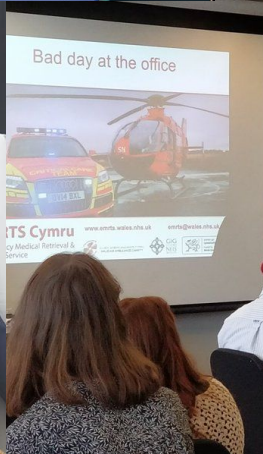
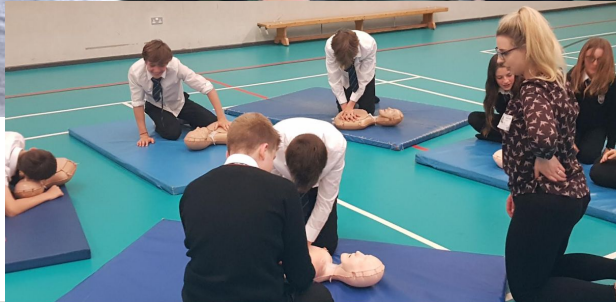


# Emergency Medicine

Making the most of EM training

Dr Grace McKay, ST4 EM

MBBCh, FRCER Primary & intermediate, MSc Clin Ed, AOME Fellow, Honorary Lecturer Cardiff University



Training the next generation of Emergency Physicians across Wales

# All Wales School of Emergency Medicine

UPCOMING TRAINING

The All Wales School of Emergency Medicine has the responsibility to develop, oversee and deliver the training of Doctors working in the Specialty of Emergency Medicine in Wales. We work closely with the Wales Deanery & the Royal College of Emergency Medicine as well as the Health Boards in Wales to achieve this

## Latest News

We have some great things to tell you about!



**PODCASTS  
ON CRITICAL**



ACCS

Intermediate

HST

LTFT/Parental Leave

Training the next generation of Emergency Physicians across Wales

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# Overview

- 2021 Curriculum
- Planning EM
- Clinical LOs
- Generic LOs
- ACCS Admin
- Behind the scenes



# 2021 Curriculum



# ACCS

Acute Care Common Stem

# ACCS LOs

|    |   |
|----|---|
| 1  | Care for physiologically stable adult patients presenting to acute care across the full range of complexity |
| 2  | Make safe clinical decisions, appropriate to level of experience, know when and how to seek support         |
| 3  | Identify sick adult patients, be able to resuscitate and stabilise and know when it is appropriate to stop  |
| 4  | Care for acutely injured patients across the full range of complexity                                       |
| 5  | Deliver key ACCS procedural skills  |
| 6  | Deal with complex and challenging situations in the workplace   |
| 7  | Provide safe basic anaesthetic care including sedation  |
| 8  | Manage patients with organ dysfunction and failure  |
| 9  | Support, supervise and educate  |
| 10 | Participate in research and manage data appropriately   |
| 11 | Participate in and promote activity to improve the quality and safety of patient care                       |



| <b>5. Deliver key ACCS procedural skills</b> |  |
|--|--|
| <b>Key ACCS capabilities</b>                 | <p>At completion of ACCS a trainee:</p> <ul style="list-style-type: none"> <li>• will have the clinical knowledge to identify when key practical emergency skills are indicated</li> <li>• will have the knowledge and psychomotor skills to perform the skill safely and in a timely fashion.</li> </ul>  |
| <b>Descriptors</b>                           | <ul style="list-style-type: none"> <li>• Pleural aspiration of air</li> <li>• Chest drain: Seldinger and open technique</li> <li>• Establish invasive monitoring (CVP and Art line)</li> <li>• Vascular access in emergency- IO, femoral vein</li> <li>• Lumbar puncture</li> <li>• Fracture/dislocation manipulation</li> <li>• External pacing</li> <li>• Direct current cardioversion</li> <li>• Point of care ultrasound- Vascular access and Fascia iliaca block</li> </ul> |
| <b>GPCs</b>                                  | <p>Domain 1: Professional values and behaviours</p> <p>Domain 2: Professional skills</p> <ul style="list-style-type: none"> <li>• practical skills</li> <li>• communication and interpersonal skills</li> <li>• dealing with complexity and uncertainty</li> </ul>   |
| <b>Evidence to inform decision includes</b>  | <p>DOPs</p> <p>Logbook</p> <p>Entrustment decision</p> <p>MSF</p>  |

# Planning

[illegible]

|                         |   |   |
|-------------------------|---|---|
| <b>SLO 6</b>            | Support, supervise, and educate trainees and supervise others in ED   | <b>Current</b><br>I am most experienced in this SLO due to my engagement in teaching and mentoring activities, ACP/EMC course representation, and postgraduate qualifications in education  |
| <b>EDT Capabilities</b> | Prepare and deliver teaching sessions outside of the clinical environment, including simulation, small-group work and have effective constructive feedback including direct Mentor and supervise junior doctors   | <b>Future</b><br>I have many aspirations to excel in this SLO during HST and incorporate education into my longstanding career  |
| <b>Key Descriptors</b>  | Deliver teaching and feedback Supervise and mentor  | <b>How</b><br>HSTs, STAT ESSE, HST Masters in Clinical Education, BSCEM learning and FQCMed Regional Training Delivery Local Teaching Delivery National EMJA conference Mentoring Network GMC EMU & honorary Lecturer Cardiff University LITTS Job Role with Cardiff University |
| <b>Evidence</b>         | Writings, MEd 700 Training Courses  |   |
| <b>SLO 10</b>           | Participate in Research and Managing Data Appropriately   | <b>Current</b><br>I have conducted qualitative research for a Masters in Clinical Education and therefore I am familiar with qualitative methodology and ethical approval.  |
| <b>EDT Capabilities</b> | Appraise, synthesise, communicate and use research evidence to develop ED care Actively participate in research   | <b>Future</b><br>I intend to pursue more active engagement in quantitative research during my HST including developing further understanding of EBM and statistical research methods  |
| <b>Key Descriptors</b>  | Critically appraise literature Shared decision making in light of evidence based medicine Research methodology, principles and concepts Conduct research Public health epidemiology   | <b>How</b><br>Local and Regional, Journal Clubs BSCEM learning & FQCMed Cardiff University CA resources GCP training  |
| <b>Evidence</b>         | ACAP Journal Club Form  | <b>How</b><br>EMU ACAP Clinical Audit   |
| <b>SLO 11</b>           | Improve quality and safety of patient care  | <b>Current</b><br>I have been involved in data collection for QIP however I have poor understanding of QI methodology and process.  |
| <b>EDT Capabilities</b> | Provide clinical leadership on effective Quality Improvement work Support and develop a culture of departmental safety and good clinical governance   | <b>Future</b><br>During IDA I intend to lead a QIP and develop my understanding of QI and patient safety fundamentals   |
| <b>Key Descriptors</b>  | Consider patient safety Participate in Quality Improvement Run-in sessions  | <b>How</b><br>QIP Around regional QI training days BSCEM learning modules Management Portfolio Critical Incident Form, Complaints, patient survey   |
| <b>Evidence</b>         | QIP BSCEM learning  | <b>How</b><br>QIP Morbidity and mortality meetings Clinical governance meetings   |
| <b>SLO 12</b>           | Manage administrative issues  | <b>Current</b><br>During intermediate training I gained experience in managing complaints and critical incident. I also attended clinical governance meetings and represented ED in a JCI forum   |
| <b>EDT Capabilities</b> | Handle a complaint, prepare a report, and be aware of the relevant medico-legal directives Investigate a critical incident, participate in clinical governance activities and risk reduction projects Manage the staff rota, being aware of relevant employment law and recruitment activities including interviews | <b>Future</b><br>During IDA I plan to address other elements of the leadership curriculum including preparing reports and participating in clinical governance  |
| <b>Key Descriptors</b>  | Complaints Reporting Serious incidents Represent ED on committees Board/ment Roles  | <b>How</b><br>BSCEM learning eMPL leadership modules ACP/EMC Leadership Study Club HealthCare Leadership Academy ACP/EMC and HSTs administration Contribute to 2022 directed mental induction Organise Training ED  |
| <b>Evidence</b>         | Writings Management Portfolio   |   |

| Clinical SLOs PDP       |   |
|-------------------------|---|
| <b>SLO 1</b>            | Care for the physiologically stable adult patient across the full range of complexity   |
| <b>Key Capabilities</b> | Assess and manage all adult patients with both physical and psychological ill health<br>Manage with no supervisor involvement |
| <b>Key Descriptors</b>  | Cognitive impairment and frailty<br>Mental health<br>Complex comorbidities<br>Observation                                     |
| <b>Evidence</b>         | WBPAe; CbD, ESLE, Mini-CEX, MSF<br>FCS entrustability<br>FRCEM exam<br>Logbook of cases                                       |

| Generic SLOs PDP        |   |
|-------------------------|---|
| <b>SLO 5</b>            | Support, supervise, and educate   |
| <b>Key Capabilities</b> | Train and supervise others in ED<br>Provide and deliver teaching sessions outside of the clinical environment, including simulation, small group work and provide effective constructive feedback including debrief<br>Mentor and appraise junior doctors |
| <b>Key Descriptors</b>  | Deliver teaching and feedback<br>Supervise and mentor   |
| <b>Evidence</b>         | Witness, self, 360<br>Teaching Diaries  |
| <b>SLO 10</b>           | Participate in research and Managing Data Appropriately   |
| <b>Key Capabilities</b> | Appraise, synthesise, communicate and use research evidence to develop QI care<br>Actively participate in research  |
| <b>Key Descriptors</b>  | Critically appraise literature<br>Shared decision making in light of evidence based medicine<br>Research methodology, principles and concepts<br>Conduct research<br>Public health epidemiology   |
| <b>Evidence</b>         | QI<br>QI  |

|                         |   |   |
|-------------------------|---|---|
| <b>SLO 1</b>            | Care for the physiologically stable adult patient across the full range of complexity   | <b>Current</b><br>I have developed reasonable experience managing adult patients in ED throughout my ACSS and Intermediate training as evidenced in my portfolio.   |
| <b>Key Capabilities</b> | Assess and manage all adult patients with both physical and psychological ill health<br>Manage with no supervisor involvement | <b>Future</b><br>During ST4 I plan to continue managing a broad spectrum of EM adult patients and will increasingly work independently without supervision. I also intend to gain experience in managing more complex and challenging clinical cases. |
| <b>Key Descriptors</b>  | Cognitive impairment and frailty<br>Mental health<br>Complex comorbidities<br>Observation                                     | <b>How</b><br>WBPA: ACAT, ESLE x 3, CbD x 3<br>Attendance at local & regional teaching<br>RCCEM eLearning Mental Health Legislation<br>SPA days:<br>- Attend PRU to better appreciate MDT for cognitive impairment and frailty                        |
| <b>Evidence</b>         | WBPAe; CbD, ESLE, Mini-CEX, MSF<br>FCS entrustability<br>FRCEM exam<br>Logbook of cases                                       |   |

|                         |   |
|-------------------------|---|
| <b>SLO 1</b>            | Care for the physiologically stable adult patient across the full range of complexity   |
| <b>Key Capabilities</b> | Assess and manage all adult patients with both physical and psychological ill health<br>Manage with no supervisor involvement |
| <b>Key Descriptors</b>  | Cognitive impairment and frailty<br>Mental health<br>Complex comorbidities<br>Observation                                     |
| <b>Evidence</b>         | WBPAe; CbD, ESLE, Mini-CEX, MSF<br>FCS entrustability<br>FRCEM exam<br>Logbook of cases                                       |

|                        |   |
|------------------------|---|
| <b>Key Descriptors</b> | Complexity<br>Reports<br>Service locality<br>Relevant ED or community<br>Relevant<br>Review |
| <b>Evidence</b>        | Witness<br>Management Portfolio   |

|                         |   |
|-------------------------|---|
| <b>SLO 1</b>            | Care for the physiologically stable adult patient across the full range of complexity   |
| <b>Key Capabilities</b> | Assess and manage all adult patients with both physical and psychological ill health<br>Manage with no supervisor involvement |
| <b>Key Descriptors</b>  | Cognitive impairment and frailty<br>Mental health<br>Complex comorbidities<br>Observation                                     |
| <b>Evidence</b>         | WBPAe; CbD, ESLE, Mini-CEX, MSF<br>FCS entrustability<br>FRCEM exam<br>Logbook of cases                                       |

|                        |   |
|------------------------|---|
| <b>Key Descriptors</b> | Complexity<br>Reports<br>Service locality<br>Relevant ED or community<br>Relevant<br>Review |
| <b>Evidence</b>        | Witness<br>Management Portfolio   |

## ST4 Educational PDP

| SLO | Current  | Future   | Actions   |
|-----|--|--|---|
| 1   | I have developed reasonable experience managing adult patients in ED throughout my ACCS and Intermediate training as evidenced in my eportfolio.   | During ST4 I plan to continue managing a broad spectrum of EM adult patients and will increasingly work independently. I intend to gain experience in managing more complex and challenging cases. | <b>G</b> to complete <u>WBPA</u> , attend local & regional teaching, complete RCEM & elth e-learning on Mental Health Legislation and attend PRU shift (after Maternity leave)                        |
| 2   | I have begun to develop my expertise in decision making, diagnostic reasoning and answering clinical questions throughout my ACCS and Intermediate training.   | During ST4 I plan to gain further understanding of human factors and decision making processes by specifically reviewing these topics in SIM and my further reading.                               | <b>G</b> to complete <u>WBPA</u> , attend local & regional teaching, complete RCEM <u>elearning</u> on Human Factors and attend TEAMS course (after Maternity leave)<br><b>K</b> Human Factors in SIM |
| 3   | Throughout my ITU and EM placements, I have had experience leading resuscitation teams, communicating with patients and their relatives in critical situations. Moreover during the COVID pandemic, I refined my expertise in end of life decision making. | During ST4 I plan to dedicate time to maintaining and developing my ABC resuscitation skills and gaining instructor status in life support courses   | <b>G</b> to complete <u>WBPA</u> , attend local & regional teaching, attend theatres and ITU during SPA.<br><b>K</b> to contact Anaesthetic and ITU consultants to facilitate SPA                     |



# ARCP 'checklist'

| 1                            | 2                                     | 3                           | 4                                | 5                | 6                   | 7                          | 8             | 9                | 10                    | 11            | 12               |
|------------------------------|---------------------------------------|-----------------------------|----------------------------------|------------------|---------------------|----------------------------|---------------|------------------|-----------------------|---------------|------------------|
| ESLE                         | ESLE                                  | ESLE                        | Mini-Cex Trauma lead             | Mini-Cex Unwell  | DOPs x 26           | ESLE                       | ESLE          | STAT             | ACAF                  | QIAT          |                  |
| ESLE                         | ESLE                                  | ESLE                        | DOPs wound care                  | Mini-Cex Unwell  | USS x 40            | ESLE                       | ESLE          | ESLE             | Journal Club          |               |                  |
| ESLE                         | ESLE                                  | ESLE                        | DOPs suture                      | Mini-Cex Unwell  |                     | ESLE                       | ESLE          | MSF              | Journal Club          |               |                  |
| CBD Complex                  | CBD Decision                          | CBD EOL                     | DOPs block                       | Mini-Cex Unwell  |                     | CBD challenging            | CBD Leader    | DTCT             |                       |               |                  |
| CBD MH                       | CBD answer Qu                         | Mini-Cex Peri-arrest        | DOPs MUA                         | CBD Safeguarding |                     | CBD challenging            | CBD Leader    | DTCT             |                       |               |                  |
| CBD Frail                    | CBD Discharge                         | Mini-Cex Resus lead         |                                  | CBD NAI          |                     | CBD challenging            | CBD Leader    | DTCT             |                       |               |                  |
| Teaching Days                | Teaching Days                         | Teaching Days               | Teaching Days                    | Teaching Days    | Teaching Days       | Teaching Days              | Teaching Days |                  | Teaching Days         | Teaching Days | Teaching Days    |
| SIM                          | SIM                                   | SIM                         | SIM                              | SIM              | SIM                 | SIM                        | SIM           |                  |                       |               |                  |
| FRU shift                    | -                                     | Theatre                     | MIU                              | -                | USS                 | -                          |               | Procedural Day   | Journal Club          | QIP           | Serious Incident |
|                              |                                       | ITU                         | Trauma meetings                  |                  |                     |                            |               | EMTA conference  | Audit                 | M&M           | Complaint        |
|                              |                                       |                             |                                  |                  |                     |                            |               |                  |                       | CC            | Induction        |
| -                            | TEAMS                                 | GIC                         | ETC                              | APLS             | Procedural course   | -                          | HLA Scholar   | GIC              | GCP                   |               |                  |
| Case Logbook                 | Case Logbook                          | Airway Logbook              | Procedure Logbook                | Case Logbook     | Airway Logbook (10) | Case Logbook               | Management    | Teaching Logbook |                       | Management    | Management       |
|                              |                                       | Procedure Logbook           |                                  |                  | Procedure Logbook   |                            |               |                  |                       |               |                  |
| MH RCEM                      | <a href="#">RCEM decision</a>         | <a href="#">RCEM EOL</a>    | SWTN SOP                         | Safeguarding     | RCEM elearning x 16 | Violence                   | RCEM leader   |                  | CA Cardiff            |               | RCEM leader      |
| MHA RCEM                     | <a href="#">RCEM bias</a>             | <a href="#">RCEM RSI</a>    | RCEM MUA                         | NAI              | NATSSIP             | Self discharge             |               |                  | <del>CA Cardiff</del> |               |                  |
| Legal MH                     | <a href="#">Decision making</a>       | <a href="#">RCEM EOL</a>    | <a href="#">RCEM hand injury</a> | CAMHS            |                     | Police enquiry             |               |                  | CA Cardiff            |               |                  |
| Violence ED                  | <a href="#">Cognitive error</a>       | <a href="#">RCEM DNACPB</a> | <a href="#">RCEM wound</a>       | Childrens act    |                     | Data Protection Act,       |               |                  | CA Cardiff            |               |                  |
| <a href="#">Elderly Care</a> | <a href="#">Diagnostic method</a>     | <a href="#">RCEM QD</a>     | <a href="#">RCEM sedation</a>    |                  |                     | Information Governance,    |               |                  | CA Cardiff            |               |                  |
| MH elfh                      | <a href="#">Situational Awareness</a> | <a href="#">elfh EOL</a>    | <a href="#">elfh trauma</a>      |                  |                     | Freedom of Information Act |               |                  |                       |               |                  |
| <a href="#">MCA elfh</a>     | <a href="#">Decision making</a>       | Advance Directives          |                                  |                  |                     | Caldicott Report,          |               |                  |                       |               |                  |
|                              |                                       | DNAR Decisions              |                                  |                  |                     |                            |               |                  | CA HEIW               |               |                  |
|                              |                                       | DOLS                        |                                  |                  |                     |                            |               |                  | CA Resus Room         |               |                  |
|                              |                                       | Organ donation              |                                  |                  |                     |                            |               |                  | CA RCEM               |               |                  |

## Documents

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# Clinical LOs

## Shopping list

- Milk
- Beer
- Bread
- Onions
- Salad
- Tomatoes
- Eggs
- Cheese
- Apples







# Generic LOs

# Teaching

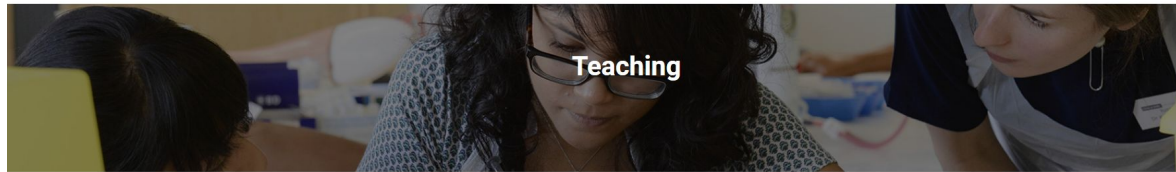
*‘Will be able to set learning objectives, deliver a teaching session and deliver effective feedback with an action plan’*

## How?

- Departmental Teaching
- Cardiff Uni
- UG centre
- Near Peer teaching
- Courses



[EM Hospitals](#) • [Teaching Calendar](#) • [Training](#) • [Outside the ED](#) • [Careers](#) • [Wellbeing](#) • [Contacts in EM](#)



A key element of being an EM specialist is the ability to teach and support.

The GMC requires all clinicians to: set learning objectives, deliver teaching sessions, provide feedback, supervise, mentor, and appraise junior doctors.

[RCM Assessment of Teaching](#)

[AWSEM Teaching Handbook](#)

[Teaching Resources](#)

The [AWSEM Teaching Handbook](#) is intended to help EM trainees structure their learning and understanding of SLO 9.

The Handbook was created in August 2021 by:

- Dr Craig Planells (EM Consultant and MSc Clin Ed)
- Dr Grace McKay (EM HST and MSc Clin Ed)
- Dr Flon James (EM Core Trainee and MSc Clin Ed)

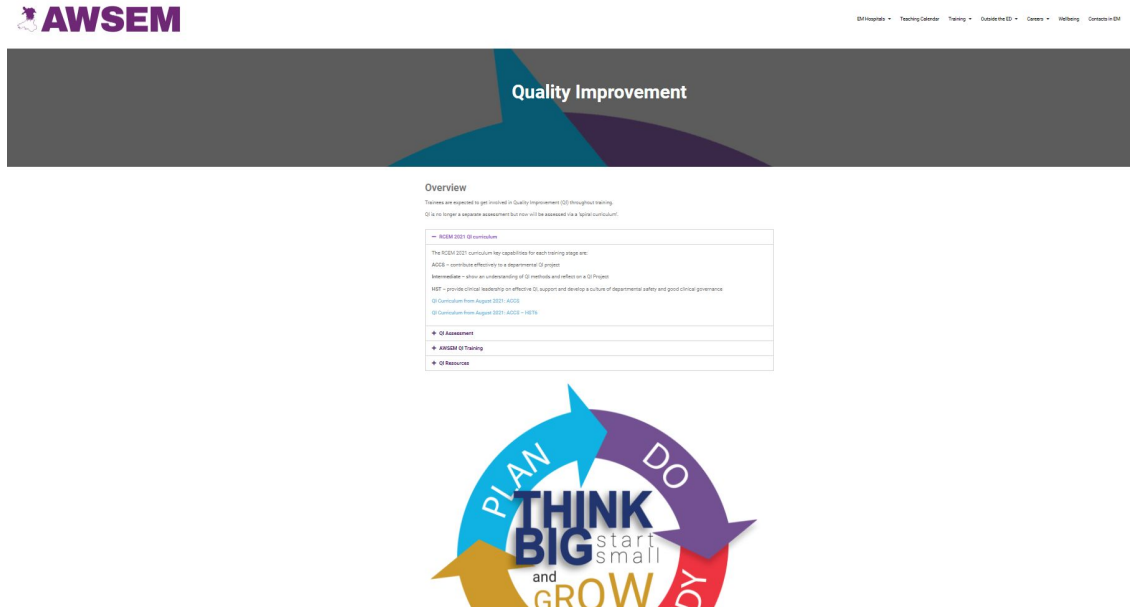
Please contact [craig.planells@wales.nhs.uk](mailto:craig.planells@wales.nhs.uk) if you have any comments.

# QI

‘Will be able to contribute effectively to a departmental QIP’

## How?

- Regional teaching 08/09/21
- AWSEM website
- RCEM e-learning



The screenshot displays the AWSEM website's Quality Improvement (QI) section. At the top, the AWSEM logo is visible on the left, and navigation links (QI templates, Teaching Calendar, Training, Update the QI, Careers, Wellbeing, Contacts in QI) are on the right. The main header area features a dark grey background with a blue and purple abstract shape and the text 'Quality Improvement'. Below this, the 'Overview' section states that trainees are expected to get involved in QI throughout training. A table lists the RCEM 2021 QI curriculum, detailing the purpose of each stage: ACCE (contribute effectively to a departmental QI project), Intermediate (show an understanding of QI methods and reflect on a QI Project), and MBP (provide clinical leadership in effective QI support and develop a culture of departmental safety and good clinical governance). The table also includes links for QI Assessment, AWSEM QI Training, and QI Resources. At the bottom right, there is a circular diagram with arrows forming a cycle, labeled 'PLAN', 'DO', 'CHECK', and 'ACT'. In the center of the cycle, the text reads 'THINK BIG start small and GROW by'.

# Critical Appraisal

*‘Will be able to search the medical literature effectively and know how to critically appraise studies.’*

## How?

- Regional teaching 20/09/21
- AWSEM website
- Department Journal Clubs
- Librarian Session
- GCP Modules



EM Hospitals ▾ Teaching Calendar Training ▾ Outside the ED ▾ Careers ▾ Wellbeing Contacts in EM

## Critical Appraisal

### Overview

A key element of being an EM specialist is the ability to use research evidence to drive improvement in patient care.

The GMC requires EM doctors to: critically appraise medical literature, synthesise evidence, communicate key findings, and use research to develop patient care.

Assessment of CA

CA Resources

The RCCEM 2021 curriculum introduced SLO 10 – ‘Participate in Research and Manage Data Appropriately’

SLO 10 is assessed throughout all stages of training (see [SLO 10](#) for key capabilities) and is no longer a ‘stand alone’ examination.

#### Evidence of SLO 10:

- Each year trainees must upload an ‘Applied Critical Appraisal Form’ (ACAF) to their portfolio prior to ARCP.
- Present posters and papers at a local, regional, or national conference.
- Present research findings in departmental meetings.
- Participation in Journal Clubs using the bespoke ‘Journal Club Presentation Form’ found in the eportfolio.

SLO 10 will be assessed formatively in the MRCEM and FRCEM SBAs and the FRCEM OSCE.



ACCS Admin

## Teaching Calendar

### SEPTEMBER



### OCTOBER



### NOVEMBER

No events

### DECEMBER



## Regional Teaching Days

| Date       | Title                | Attendance | Reflection |
|------------|----------------------|------------|------------|
| 08/07/2020 | ST3 Induction        | Y          | N          |
| 22/09/2020 | Chest Trauma PCH     | Y          | Y          |
| 06/10/2020 | Registrar Ready Day  | Y          | Y          |
| 20/10/2020 | USS Day              | Y          | Y          |
| 03/12/2020 | Sedation Day         | Y          | Y          |
| 08/12/2020 | Paediatric Day       | Y          | Y          |
| 12/01/2021 | Management Day       | Y          | Y          |
| 09/02/2021 | Paediatric Neurology | Y          | Y          |
| 25/05/2021 | EMTA conference      | Y          | Y          |
| 08/06/2021 | Neuro day            | Y          | Y          |
|            |                      |            |            |

# SPA days

| Date       | Location  | Time        | Activity                                      |
|------------|-----------|-------------|---|
| 12/09/2018 | POW       | 08.00-11.00 | Eportfolio reflections                        |
|            | POW       | 11.30-13.00 | Senior teaching- Radiology meeting            |
|            | POW       | 14.00-16.00 | Delivered departmental teaching Hand injuries |
|            | POW       | 16.00-18.00 | Eportfolio linking                            |
| 19/09/2018 | POW       | 09.00-10.30 | In-situ SIM maternal sepsis                   |
|            | POW       | 11.00-12.00 | Senior teaching- Pancreatitis                 |
|            | POW       | 12.00-13.00 | Edited RCCEM e-learning                       |
|            | POW       | 13.00-14.00 | Planned JSA SIM teaching                      |
|            | POW       | 14.00-16.00 | Delivered departmental teaching Sepsis        |
|            | POW       | 16.00-17.00 | Eportfolio reflection                         |
| 09/10/2018 | POW       | 08.00-09.00 | Eportfolio reflection                         |
|            | POW       | 09.00-10.00 | In-situ SIM acute asthma                      |
|            | POW       | 11.00-11.30 | Senior teaching - Modern Slavery              |
|            | POW       | 11.30-12.00 | Senior teaching First aid in terror attacks   |
|            | POW       | 12.00-1.30  | Senior teaching UGI bleeds                    |
|            | POW       | 14.00-15.00 | Junior teaching - ALS NSTEMI                  |
| 19/10/2018 | POW       | 15.00-16.00 | Audit   |
|            | POW       | 09.00-10.00 | Eportfolio Reflection                         |
|            | POW       | 10.00-12.00 | Year 5 Simulation                             |
| 14/11/2018 | POW       | 13.00-16.30 | Rapid response                                |
|            | POW       | 10.00-11.00 | Eportfolio reflection                         |
|            | POW       | 11.00-15.30 | Audit Meeting                                 |
| 21/11/2018 | UHW       | 17.00-19.45 | EM Careers evening                            |
|            | POW       | 0900-1000   | Escape games in situ SIM                      |
|            | POW       | 1100-1300   | Information governance teaching               |
|            | POW       | 1400-1600   | Poisoning and Mental Health Teaching          |
| 21/12/2018 | POW       | 1600-1700   | Prepare HFD burns lecture                     |
|            | POW       | 0900-1000   | Critical care day                             |
|            | POW       | 0900-1200   | Eye Clinic                                    |
|            | POW       | 1200-1400   | FRCEM Revision                                |
| 17/01/2019 | POW       | 1400-1600   | NHS Management                                |
|            | Singleton | 0900-1200   | PDU   |
|            | POW       | 1300-1500   | JSA teaching                                  |
|            | POW       | 1600-1700   | Educational supervisor meeting                |





## Other Admin

### GMC National Training Survey

#### Form R

Completed on Intrepid  
Absence and Incidents

### *Faculty Education Governance Statement (FGS)*

### *ES meetings - Initial, Mid, End*

### *STR (Structured Training Report)*

### *ES end of placement report*



# Behind the Scenes...

- ACCS STC meetings
- AWSEM conference
- AWSEM Newsletter
- Wellbeing/PDSU

# Questions?



[gracefrancesmary.mckay@nhs.net](mailto:gracefrancesmary.mckay@nhs.net)