

**RCEM ST3 ARCP Decision Aid and
Educational Supervisor Report COVID 19**

The aim for this form is to be on e-portfolio and self-populating. It allows a reflective discussion between trainee and trainer to review evidence, highlight areas for development in the next training period and inform the ARCP panel.

Populated by e-portfolio			
Trainee grade		Start date of training grade	
Whole or LTFT percentage		Date training year ends	

Faculty Educational Governance Statement
Does the FECS recommend that the trainee progress to the next year of training?
Comment on any recommendations.

Yes	No

Extended Supervised Learning Events (ESLE)
A minimum of three ESLEs will be completed. ESLEs will sample activity in all available areas of the ED and must include the resuscitation room. Ideally spread through the training year with the first within 3 months of commencement. Comment on standard and scope of practice

Number completed		
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Specialty Learning Outcomes
Supervisor to comment on quality, depth and scope of evidence in e-portfolio for each SLO.
Progression of SLO 1-8 to level 3 (the trainee can operate with a supervisor away from the workplace but can attend if required). Aiming for around 4 pieces of evidence in each SLO from a range of meaningful learning opportunities; WPBA, e-learning, reflective evidence, shop floor feedback.










1. Care for physiologically stable adult patients presenting to acute care across the full range of complexity

Assess and manage all adult patients attending the ED. These capabilities will apply to patients attending with both physical and psychological ill health		
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Assess and formulate a management plan for patients who present with complex medical and social needs who manifest as one of the frailty syndromes		
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2. Support the ED team by answering clinical questions and making safe decisions

<p>able to support the pre-hospital, medical, nursing and admin team in answering clinical questions and in making safe decisions for discharge, with appropriate advice for management beyond the ED.</p>		
<p>aware of when it is appropriate to review patients remotely or directly.</p>		
<p>3. Identify sick adult patients, able to resuscitate and stabilise and know when it is appropriate to stop</p>		
<p>manage all life-threatening conditions including peri-arrest & arrest situations in the ED</p>		
<p>care for ED patients and their relatives and loved ones at the end of the patient's</p>		
<p>to effectively lead resuscitation teams</p>		
<p>4. Care for acutely injured patients across the full range of complexity</p>		
<p>assess, investigate and manage patients attending with all injuries, regardless of complexity</p>		
<p>provide leadership of the Trauma Team</p>		
<p>5. Care for children of all ages in the ED, at all stages of development and children with complex needs</p>		
<p>Be able to gather appropriate information, perform relevant clinical examination and be able to formulate and communicate a management plan that prioritises the child and where relevant the family's choices that is in their best interests</p>		

<p>Be able to identify the sick child and initiate appropriate management steps</p>		
<p>Acquire the special skills needed to resuscitate children of all ages, and know that this may differ dependent on developmental age and how this differs from adult resuscitation</p>		
<p>Assess children and young people with concerning presentations and know that some of the presenting symptoms could be manifestations of abuse</p>		
<p>6. Deliver key procedural skills</p>		
<p>The clinical knowledge to identify when key EM procedural skills are indicated</p>		
<p>The knowledge and psychomotor skills to perform the ACCS procedural skills safely and in a timely fashion</p>		
<p>7. Deal with complex and challenging situations in the workplace</p>		
<p>Be able to work effectively with patients who appear angry or distressed</p>		
<p>Be able to negotiate or manage complicated or troubling interactions</p>		
<p>behave professionally in dealings with colleagues and team members within the ED</p>		
<p>work professionally and effectively with those outside the ED</p>		
<p>8. Lead the ED shift</p>		

Have an awareness of other's workload and supports other staff members		
Be able to function as senior clinician in the ED overnight		

Logbooks	
ES to comment on range of experience across scope of practice, engagement and highlight areas that need further development. Logbooks must not contain patient identifiable data	
Procedure log	
Ultrasound log	

Generic SLOs				
Progress rating (pulled through from e-portfolio) ES to comment on each				
SLO 9 teaching	below	Satisfactory	excellent	
SLO 10	below	Satisfactory	excellent	
SLO 11	below	Satisfactory	excellent	
SLO 12 Management	below	Satisfactory	excellent	

Multisource Feedback
minimum 12 responses (annual and performed in first 6 months) minimum 3 consultants and spread of participants as agreed with Ed Sup. ES summary

Examination Progress		
If trainee has been unsuccessful at any component please document number of attempt to date		
	Result	Number attempts
Primary		
SAQ		
OSCE/SJT		

Involvement in Complaints, Serious Untoward Incidents		
If the trainee has been involved in any events in this revalidation year please document here, stating whether they are resolved or ongoing and where on e-portfolio is the trainee's reflection		
Are these events concluded satisfactorily? If no please provide further information	Yes	No

Trainee Health		
Please comment on any concerns regarding health or time out of training TOOT		
Number of TOOT days		

Educational Supervisor comment on training year progress.		
A patient log /shift log or an alternative can be used to guide a scope of practice discussion. This log does not have to be uploaded on to the e-portfolio.		
Does the FEG support trainee progression?	Yes	No
Is there a good range of evidence in e-portfolio to support progression in clinical SLO 1-8?		
Is there a range of experience across the scope of practice? Please highlight areas for further development.		
Trainee Strengths		
Areas for focus		

Suggestions for personal development plan in next training year including training recovery plans as a result of COVID 19	1
	2
	3

Trainee signature:		Date:	
Education Supervisor signature:		Date:	

The following table should only be completed if the information has not already been entered on the FORM R

During the COVID-19 pandemic did the trainee’s scope of practice change?	Yes / No (delete as appropriate)
If Yes – please describe changes:	
Has this affected the trainee’s ability to achieve the assessments listed above	Yes / No (delete as appropriate)
Has the trainee had a period of time away due to self-isolation / shielding etc?	Yes / No (delete as appropriate)
If Yes – please give dates and duration (weeks	