

Helpful hints from Spring 2020 ACP Credentialing window

1. Faculty Governance Statement (FGS)

The final FGS needs to confirm practice at ST3 level and across all areas of the department (for the relevant age group). Please see the guide for recommended ruling.

2. Self-entered forms

These should not be used for summative workplace-based assessments as they cannot be verified by the consultant. From 07 December 2020, self-entered forms for summative CBD, Mini-CEX and DOPs will not be accepted as evidence.

Self-entered forms completed prior to 07 December must either be repeated by the original assessor (using the outcome of the original self-entered form if they are in agreement) or a new assessment should be completed. Alternatively, the Clinical or Educational Supervisor may 'link' a comment to the self-entered form confirming that it represents the assessment, and that the standard has been met (if it has).

3. Practical procedures

Those that have been evidenced by CBD should be marked as 'some experience' rather than 'achieved'. If the trainee actually does these procedures the evidence should be DOPS.

4. Audit

Evidence must include evidence of actions following recommendations and re audit. Your role in the audit should be clear.

5. ESLEs and ACATs

ESLEs and ACATs used for time management and teamworking should provide evidence for this, e.g. time management should include enough patients to be able to demonstrate time management, and teamworking must reflect and comment on interactions with members of the team.

6. Patient numbers

It is expected that supervisors should be reviewing this throughout training and looking at the spread across the department (e.g. majors, resus and minors) and also across paed and adults. The number of patients seen should enable the full breadth and depth of practice to be developed to ST3 level. Very low numbers per year must be accompanied by an explanation of why the local context still means the experience is sufficient.

7. Academic declaration

Several applicants had to resubmit this time as the academic declaration was incomplete or not included. Please read the guidance and ensure it is included in your portfolio.

8. WPBAs

Please ensure that WPBAs submitted as evidence relate to the item required, e.g. arterial line CBD must explore this procedure not the interpretation of blood gases. The CBD for ACP3 airway must explore airway management. Please refer to the guidance.

9. PP21

PP21 secondary assessment should cover the re-evaluation of a patient after primary assessment and management, e.g. a shocked patient who has had initial treatment and now you are assessing response and looking for a cause.