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FEGS - ACCS's Preview

THIS VERSION IS PUBLISHED Version 19

Fields marked with ★ are required.

Section 1

Faculty Educational Governance Statement ACCS CT1-2/ST1-2 Trainee

Please complete using feedback from the training faculty based on interactions with the trainee in the workplace.

Where your response is "no" for any of the LOs you should provide explanatory comments and give a suggested entrustment rating. Where a trainee has demonstrated excellence in a particular LO you should also provide comments.

Entrustment Rating

- 1 Direct supervisor observation/involvement, able to provide immediate direction or assistance
- 2a Supervisor on the 'shop-floor' (eg ED, theatres, AMU, ICU), monitoring at regular intervals
- 2b Supervisor within hospital for queries, able to provide prompt direction or assistance and trainee knows reliably when to ask for help
- 3 Supervisor 'on call' from home for queries, able to provide directions via phone and able to attend the bedside if required to provide direct supervision
- 4 Would be able to manage with no supervisor involvement (all trainees practice with a consultant taking overall clinical responsibility)

Faculty members present:		
Date of Faculty meeting:		

ACCS LO1: Care for physiologically stable adult patients presenting to acute care across the full range of complexity

'We believe this trainee can be trusted to:

• gather appropriate information, perform a relevant clinical examination and be able to formulate and communicate a management plan that prioritises patient's choices and is in their best interests

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medical and social needs				
with senior help available within the hospital (level 2b), but not directly overlooking their work, and reliably know when to ask for help?' \star				
Comments (and suggested entrustment level if different from above):				
ACCS LO2: Make safe clinical decisions, appropriate to level of experience, knowing when and how to seek effective support				
'We believe this trainee can be trusted to:				
apply clinical guidelines				
 use diagnostic tests in ruling out key pathology, and be able to describe a safe management plan, including discharge where appropriate, knowing when help is required 				
with senior help available on the shop floor (level 2a), but not directly overlooking their work, and reliably know when to ask for help?' \star				
Comments (and suggested entrustment level if different from above):				
ACCS LO3: Identify sick adult patients, be able to resuscitate and stabilise and know when it is appropriate to stop				
'We believe this trainee can be trusted to:				
 recognise and manage the initial phases of any acute life-threatening presentation, including cardiac arrest and peri-arrest situations. establish the most appropriate level of care for critically unwell patients - including end-of life decisions - and support their needs as well as those of their loved ones. 				
with senior help available within the hospital (level 2b), but not directly overlooking their work, and reliably know when to ask for help?' \star				
Comments (and suggested entrustment level if different from above):				
ACCS LO4: Care for acutely injured patients across the full range of complexity				
'We believe this trainee can be trusted to:				
be an effective member of the multidisciplinary trauma team				
 assess, investigate and manage low energy injuries in stable patients. 				
with senior help available within the hospital (level 2b), but not directly overlooking their work and reliably know when to ask for help?' ★				

• assess and formulate a management plan for patients who present with complex

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Comments (and suggested entrustment level if different from above):				
ACCS LO6: Deal with complex and challenging situations in the workplace				
'We believe this trainee can be trusted to:				
 have the personal and professional attributes of an effective acute care clinician effectively manage their own clinical workload deal with common challenging interactions in the workplace 				
with senior help available on the shop floor (level 2a), but not directly overlooking their work and reliably know when to ask for help?' ★				
Comments (and suggested entrustment level if different from above):				
Section 2				
Any other reasons why you would be concerned for the trainee to progress?				
Please record trainee's individual strengths or areas in which they excel ★				