

# HEKSS

## Emergency Medicine

### Trainee Handbook August 2016



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for health and  
healthcare

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## Welcome

Congratulations on your recent appointment to the Emergency Medicine Training programme here in Kent, Surrey and Sussex and welcome to HEKSS Postgraduate School of Emergency Medicine. I hope your time with us will be successful and happy and that you will achieve all the competencies expected from your grade and move on to the careers of your choice.

Please ensure you register with the College of Emergency Medicine for training and that you pay the annual fee. You cannot get a CCT without doing this! As part of this process you will be registered with ePortfolio. May I remind you that the College regards use of the ePortfolio as mandatory. Please ensure that you keep this up to date and this will make the Annual Reviews of Competence Progression (ARCP) much easier.

You are responsible for ensuring that you keep up with getting your competences signed off and getting appropriate meetings performed .

I look forward to meeting you in due course and wish you an enjoyable time in KSS.

**Dr Amanda Wellesley**  
**Head of School**

[Emergencymedicine@kss.hee.nhs.uk](mailto:Emergencymedicine@kss.hee.nhs.uk)

## Important Contacts

It can be quite confusing knowing who to contact when you have an enquiry. Below is a list of the contacts at HEKSS with a summary of their responsibilities to guide you to the correct person. Please do not hesitate to contact them when you need assistance.

Name & Contact Details	Role & Responsibilities
Dr Graeme Dewhurst	<b>Dean for Primary and Secondary Care</b> Is responsible for overseeing the training of all Specialties within HEKSS as of 1st September 2015
Dr Amanda Wellesley <a href="mailto:AWellesley@kss.hee.nhs.uk">AWellesley@kss.hee.nhs.uk</a>	<b>Head of School of Emergency Medicine</b> The Head of School is responsible for ensuring delivery of training within Emergency Medicine across Kent, Surrey and Sussex from ST4 and above
Dr Kamalakannan Veeramuthu <a href="mailto:Kamalakannan.veeramuthu@sash.nhs.uk">Kamalakannan.veeramuthu@sash.nhs.uk</a>  Emergency Medicine TPD	<b>Training Programme Director</b> The Training Programme Director (TPD) is appointed by the School of Emergency Medicine and ensures that the generic training at higher level within Emergency Medicine runs smoothly. The college tutors of each trust work directly with the TPD, if you have any concerns about your training and would rather discuss the issues with someone outside of your trust - the TPD would be your contact.
Anthony Hudson <a href="mailto:AnthonyH@kssairambulance.org.uk">AnthonyH@kssairambulance.org.uk</a>  PHEM TPD	<b>Pre-Hospital Emergency Medicine Training Programme Director</b>
Kayleigh Lord Jennifer Oluyomi Elizabeth Norton Sally-Ann Maher Shahidul Amin (Jewel)  <a href="mailto:Emergencymedicine@kss.hee.nhs.uk">Emergencymedicine@kss.hee.nhs.uk</a>	<b>Specialty Workforce Team</b> Specialty Workforce Project Manager Specialty Workforce Coordinator Specialty Support Advisor Specialty Workforce Administrator Specialty Workforce Administrator  The non-clinical team to contact regarding any training matters or when you are not sure of whom to contact regarding any issues.
Salwa Malik <a href="mailto:salwa.malik@doctors.org.uk">salwa.malik@doctors.org.uk</a>	<b>Trainee Representative(s)</b> Represents all Emergency Medicine Trainees in HEKSS. Attends the Committee meetings quarterly to feedback any issues raised regarding training programmes.

## **Role of Organisations and Statutory bodies**

### **Role of Health Education England**

Health Education England (HEE) replaced the functions of the Strategic Health Authority from April 2013. HEE provides leadership for the new education and training system with a remit for multidisciplinary education and training. HEE is responsible for commissioning education and training through the development of local education and training boards (LETBs)

### **Role of Health Education Kent, Surrey and Sussex (HEKSS)**

The Emergency Medicine specialty workforce team is hosted by HEKSS who are currently responsible for the recruitment of trainees, the Annual Review of Competence Progression (ARCPS), Allocation of a National Training Number (NTN) for CCT or CESR, managing training programmes, managing trainees that are working less than full time, (LTFT), managing the approval of various out of programme opportunities and managing trainees who require additional support.

### **Role of the Royal College of Emergency Medicine (RCEM)**

The Royal College of Emergency Medicine is the professional body responsible for the specialty of Emergency Medicine throughout the United Kingdom. Its principle responsibility is to ensure the quality of patient care through the maintenance of standards in Emergency Medicine and its sub-specialties.

The activities of the RCEM are varied, but include the setting of standards of clinical care, establishing the standards for the training of Emergency Medicine doctors and the continued medical education of all practising Emergency Medicine doctors.

The RCEM is responsible for developing the specialty curricula in accordance with the principles of training and curriculum development established and approved by the GMC Postgraduate Board. Only approved curricula can be used for delivering specialty training programmes.

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The RCEM is responsible for delivering the examinations for MRCEM and FRCEM for trainees. All Emergency Medicine trainees must pass the FRCEM exam to be awarded a CCT or CESR-CP.

### **Role of General Medical Council (GMC)**

The General Medical Council is the independent regulator for doctors in the UK, its statutory purpose is 'to protect, promote and maintain the health and safety of the public' the GMC's powers and duties are set out in the medical Act 1983. The GMC maintains the specialist register.

### **The Gold Guide**

The Gold Guide contains details of how postgraduate medical education is governed in England. **The 2016 Gold Guide, 6<sup>th</sup> Edition** is available from the COPMED website [www.copmed.org.uk/publications/th-gold-guide](http://www.copmed.org.uk/publications/th-gold-guide)

### Trainee Responsibilities

All trainees should ensure they are registered/enrolled for training with the College as soon as possible after starting the HST Emergency Medicine training programme. Note that enrolling for training is not the same thing as becoming a member of the college. These are normally two separate processes and the membership and training fees are separate.

Trainees must register with the Royal College of Emergency Medicine Training Standards Committee (TSC) within the first month of joining the training programme to gain access to the e-portfolio. We strongly recommend that new trainees should also become Associate Members of the College, however trainees must note that registration with the TSC is not synonymous with becoming a member of the College. Application forms for all categories of College Membership are found on the RCEM website.

Trainees will be sent a projected CCT/CESR date by the College TSC. This date presumes that training is both full time and continuous. Should the trainee have any interruption to their training programme they must inform the TSC in order that the CCT/CESR date can be amended accordingly. The maximum permitted absence during each 12 month period of the curriculum is two weeks (whole time equivalent). This applies to all absences other than annual leave e.g. sickness, maternity, compassionate paid/unpaid leave etc. Records of all leave taken should be kept on the College e-portfolio.

As adult learners it is the responsibility of the trainees to ensure that they maximise the training opportunities available to them, including attendance at training days, ensuring resuscitation courses and level three child protection training are up to date, completing required workplace based assessments etc. Trainees must be proactive in ensuring that the maximum benefit is obtained from the training opportunities provided, including completing College e-learning modules.

Each new trainee should contact their respective Training Programme Director

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(TPD) to review their overall training needs and plan a provisional training programme for the following three years.

Trainees must arrange to meet formally with their Educational Supervisor within the first month of taking-up each new post on the rotation to set training objectives for the post.

Opportunities for feedback should be welcomed and the feedback integrated into personal development plans.

Trainees must actively engage with the training programme and ensure that all relevant information is stored appropriately within their e-portfolio. The portfolio must be kept up to date as trainee engagement may be assessed remotely by the School and TPDs

The trainee should be familiar with the 2015 Royal College of Emergency Medicine curriculum. Gaps in knowledge and skills should be actively sought out and dealt with.

High standards of clinical and professional knowledge and skills should be aimed for, as the trainee seeks to become an expert in Emergency Medicine.

Trainees are expected to take the initiative in undertaking appropriate WBAs and in requesting appraisal meetings etc.

Trainees must be able to work as a member of trauma and cardiac arrest teams and when appropriate to lead such a team.

Trainees must attend their Regional training meetings (excluding annual leave and sickness). Attendance at these training meetings will be monitored and will inform the ARCP process. Trainees are expected to be punctual and to attend for the whole training day. Persistent late attendance or early leaving will be noted and if not corrected, this will affect their ARCP outcome.

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Trainees should be able to attend approved courses and conferences and where possible, should be able to attend one of the College conferences each year, although the needs of the service may make this difficult for some sites.

Trainee must undertake Management and Quality Improvement Projects as required under the new Emergency Medicine curriculum and assessment system

Trainees should be involved in audit and research and attend departmental audit meetings. Advice and assistance for either can be sought locally, or regionally, (from the TPD, or the Regional Academic lead for the sector). All trainees should aim for at least 1 peer reviewed publication by the end of their ST5 year.

If you wish to permanently leave the training programme at any stage prior to your confirmed end date, HEKSS will require a minimum of three months' notice. If necessary, trainees must resign from both the training site and the LETB, if they wish to leave the programme before reaching their CCT date. Resigning from the training programme is a very serious step to take and trainees are strongly advised to seek advice from their consultants, TPDs or School, to ensure that they are fully aware of the implications of resignation on their future career prospects.

## The Emergency Medicine Training Programme

The RCEM introduced a new Emergency Medicine Curriculum for all trainees in ST3-ST6 training years in August 2015. This includes several new assessment tools (e.g. Extended Supervised Learning Events (ELSE)). Further details on College curriculum and guidance on the new requirements can be found on the RCEM website link:

<http://www.rcem.ac.uk/Training-Exams/Curriculum/Curriculum%20from%20August%202015>

### Induction

Each training site must ensure that all trainees have an induction programme both for the Hospital and the Department. This should include details of the rota; leave arrangements, local policies and protocols etc. Before the end of the first month, the trainee must have a comprehensive initial meeting with his/her Educational Supervisor to review previous experience and to set goals and objectives in order to meet the developmental needs of the individual trainee. All educational, induction and appraisal meetings should be recorded in the trainee's e-portfolio. This educational meeting is in addition to the meeting with the TPD for the rotation who oversees the three year programme.

### Progress review

There should then be regular quarterly progress review meetings with the Educational Supervisor (more frequently if necessary). The trainee should take the initiative in requesting these meetings. The meetings should cover the progress of the trainee; achievements against goals set at previous meetings, and allow for feedback from the trainee on the training. Training issues (positive or negative) should be raised at this meeting and appropriate records taken. These records form an important part of the training record for the trainee and should be dated and signed by both the trainer and trainee to confirm that they are an accurate record of the meeting.

Any unresolved issues or on-going difficulty, whether in relation to training or other matters which have not been solved locally, should in the first instance be raised with

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the Training Programme Director. If the trainee wishes to discuss the matter further, he/she should contact the Head of School.

After each year of training there will be an Annual Review of Competence Progression (ARCP) where the trainee must be able to demonstrate that they have achieved the competencies as set out in the College curriculum. This will require records of Work Based Assessments (WBAs), reports from Clinical / Educational Supervisors, records of any external training, audits, research etc. Failure to produce the required documentation may prevent progression through the training programme. The EM programme now uses the Royal College of Emergency Medicine e-portfolio during the ARCP and all trainees must therefore be registered with the College to gain access to the e-portfolio.

### **Faculty Educational Governance Statement**

From August 2015, at the end of each post the local Educational Faculty will compile a report on the trainee, in addition to the Structured Training Report (STR) compiled by the Educational Supervisor after each placement. The local Faculty includes the EM consultant body and other senior clinical staff from the Emergency Department. This Faculty group will advise the ARCP panel, as to whether they feel that the trainee should be able to progress to the next year within the training programme. The final decision will however still rest with the ARCP panel.

Further information on the Faculty Educational Governance Statement can be found via this link: <http://www.rcem.ac.uk/Training-Exams/Work%20place%20based%20assessment/The%202015%20RCEM%20WPBA%20schedule>

## Exams

The GMC have approved the changes to the Colleges examination structure, with an effect from August 2016. The existing MRCEM and FRCEM examinations will therefore be replaced with a suite of examinations that will lead to the award of Fellowship of the College (FRCEM). The intention is that the current MRCEM will be replaced by an Intermediate Certificate and the FRCEM will become more modular and elements of the examination will be delivered more locally. Trainees will also need to undertake several management projects during their training and also to undertake a significant Quality Improvement Projects (QIP).

A number of these changes will be introduced with effect from August 2016 whilst others will be phased in over the next two years to permit trainees and other examination candidates the opportunity to complete the existing suite of examinations. This is a significant restructuring of the RCEM examination systems and trainees are advised to ensure that they understand the nature of the next FRCEM exit examination as it is introduced.

Full details of the new RCEM exam regulations and information packs can be found on the RCEM website link:

<http://www.rcem.ac.uk/Training-Exams/Exams/Examination%20Regulations%20&%20Information%20Packs>

FRCEM Final SAQ/CA			
Application Opening Date	20/6/16	12/12/16	19/6/17
Application Closing Date	8/7/16	6/1/17	7/7/17
Examination Date	8/9/16	16/3/17	7/9/17

FRCEM Final OSCE/VIVA			
Application Opening Date	20/6/16	12/12/16	19/6/17
Application Closing Date	8/7/16	6/1/17	7/7/17

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Examination Date	31/10- 4/11/16 (OSCE)	11- 19/5/17 (OSCE)	2- 10/11/17 (OSCE)
	7- 11/11/16 (VIVA)	22- 26/5/17 (VIVA)	13- 17/11/17 (VIVA)

## Out of Programme Policy and overview

This guidance covers all Specialty Trainees in the HEKSS with the exception of GP, and offers direction for all Specialty Schools and Trainees. This document indicates the HEKSS preferred methodology for implementing the Gold Guide 'Out of Programme (OOP)' guidance. The Guidance can be found online at <http://kss.hee.nhs.uk/policies-and-procedures/out-of-programme/>

A Trainee may take time out of their programme to undertake a period of research, gain clinical experience or other appropriate categories that is or is not available within KSS. Out of Programme placements are designed to accommodate this and can take place either in the UK or abroad.

All OOP requests need to be agreed by the Postgraduate Dean, so trainees are advised to discuss their proposals as early as possible. It is normally expected that a trainee would have completed one year of training before submitting an application given the short period and nature of the training. All applications for OOP that trainees wish to have contribute towards the award of their

### Types of OOP

**There are four types of OOP which may be considered:**

- **OOPT – Out of Programme for Approved Clinical Training**  
This is where a trainee is undertaking GMC prospectively approved clinical training which is not part of the trainee's specialty training programme.
- **OOPE – Out of Programme for Clinical Experience**  
Where a trainee is gaining clinical experience which is not approved by GMC but which may benefit the doctor or help support the health needs of other countries.
- **OOPR – Out of Programme for Research**  
Where a trainee is undertaking a period of research.
- **OOPC – Out of Programme for Career Break**  
Where a trainee is taking a planned career break from the specialty training programme.

### Notice

Trainees should give their Dean/Postgraduate Dean as well as current and next employers a minimum of six months' notice, but preferably as much as possible. This is to ensure that service issues and the needs of patients can be properly addressed. In exceptional circumstances notice of three months may be acceptable.

If the OOP is to be counted towards your CCT then prospective GMC Postgraduate Board approval must be agreed and you should make this clear on your application when you return this to HEKSS. Failure to submit your OOPT application in good time before the post starts will mean the GMC will not count the time towards your CCT. Retrospective applications will not be accepted.

You must ensure that you give a specific return date to the programme otherwise the Training Programme Director may not be able to accommodate you within the programme when you return, as per the Gold Guide.

The Royal College of Emergency Medicine will also need to be informed of any OOP, as this could affect your CCT date and they can calculate this for you. Copies of the approvals will be sent from HEKSS to the College but it is the trainee's responsibility to ensure that their CCT date is correct.

## Sub-Specialty Training

In addition to your higher specialty training in Emergency Medicine, trainees have the opportunity to undertake sub-specialty training as below:

### Paediatric sub-specialty training

HE London currently has five Paediatric Emergency Medicine sub-specialty posts:

- St George's Hospital
- University Hospital Lewisham
- St Thomas' Hospital
- Royal London Hospital

This is to allow trainees to sub-specialise in Paediatric Emergency Medicine. These posts will be advertised nationally and will appear on the HE London website here:

<http://www.londondeanery.ac.uk/var/recruitment>

The posts are for 12 months and will usually require an extension of your CCT date by an extra year. This will lead to a CCT in Emergency Medicine, with subspecialty accreditation in Paediatric Emergency Medicine. As all Paediatric Emergency Medicine posts are now advertised nationally, there may also be opportunities for trainees to undertake this training elsewhere in the UK as an OOPT, following the procedure described below. You must also complete an OOP form so that your current Training Programme Director, Head of School and HEKSS are aware of your training plans. If approved, you must contact the College of Emergency Medicine in order to extend your CCT date and receive subspecialty accreditation.

Please visit the College of Emergency Medicine's website for further information:

<http://www.collemergencymed.ac.uk/Training-Exams/Paediatric%20Emergency%20Medicine/PEM%20Training>

### **Pre-Hospital Emergency Medicine subspecialty training**

Pre-Hospital EM is a new sub-specialty that is available to EM trainees. Training programmes in this subspecialty are available in some regions. Like paediatric EM, subspecialty training posts would normally be for 12 months and will be advertised nationally. If you are interested in this subspecialty training you must discuss your wishes as soon as possible with your current Training Programme Director, apply for a training programme and complete an OOP form.

Please view the intercollegiate pages for more information about this subspecialty - <http://www.ibtphem.org.uk/IBTPHEM/Welcome.html>.

## Training days

HEKSS School of Emergency Medicine will be running 12 Regional Training Days (RTD) during the academic year. A full list of dates and the corresponding topics can be found on our website:

Any changes to the RTD teaching programme will be notified to you via email, please also check the website for the most up to date information.

RTDs are run regionally, based at acute hospitals and DGHs. All events are mapped to the curriculum. You should be using the August 2015 version of the curriculum for your ST4 – ST6 years. A copy of the curriculum can be found at the following link:

<http://www.collemergencymed.ac.uk/Training-Exams/Curriculum>

It is a requirement that you attend a minimum of 80% of EM RTDs in order to progress through your training.

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## At the End of Specialist Training

### Acting up as a consultant

During the last six months of your training you are eligible to 'act up' as a consultant for up to three months. You do not require College approval for this but permission must be granted by your Training Programme Director and the Specialty Workforce Team

The following guidelines apply:

- The correct term for experience of consultant duties prior to gaining CCT is Acting up (the term Locum consultant is not appropriate prior to CCT)
- Acting up should only be considered in the last 6 months of training (preferably as close to CCT as possible) and will usually be a short-term post (2-3 months)
- Acting up must only be offered to a trainee who is making satisfactory progress with NO significant requirements or competences to be signed off or completed for CCT/CESR-CP purposes. The trainee must hold full FRCEM (confirmed by TPD).
- The trainee must have supervisory mechanisms in place during the Acting up post, comparable to any other trainee at the same level of training

Once agreed with the TPD you must inform the Specialty Workforce team by email of the dates, and be prepared to show documentary evidence of satisfactory completion of the period, including details of how you have used the time to develop the clinical and management parts of the curriculum.

For further advice, please contact your Training Programme Director or the Specialty workforce team.

RCEM Guidance is available via the following link:

<http://www.rcem.ac.uk/Training-Exams/Training/General%20Training%20Information/>

## Obtaining an ARCP Outcome 6

The Specialty Workforce team will normally contact trainees three to six months prior to their CCT date to arrange a final ARCP 6. At your final ARCP you will be expected to demonstrate that you have achieved the competence requirements for the full curriculum and have successfully obtained full FRCEM. If a trainee is not in a position to apply for CCT at the expected time, arrangements will be made to extend the length of training where appropriate.

If you have not been invited to your final ARCP within three months of your CCT date please contact [emergencymedicine@kss.hee.nhs.uk](mailto:emergencymedicine@kss.hee.nhs.uk)

## Grace Period

From the date of your CCT/CESR-CP every trainee is entitled to a grace period of **up to six months**. At the end of this period, your training number will be withdrawn.

The purpose of the grace period is to give you the opportunity to obtain a post whilst still in the training programme. During this period, you are expected to take all necessary steps to obtain a post or follow other paths based on individual career plans. In the meantime, should you obtain secure employment outside the training programme, you must give the Specialty Workforce Team three months' notice of your resignation from the training programme.

## Applying for CCT or CESR CP

Before a trainee can become a Consultant in a substantive position they must make an application for specialist registration.

The Training Administrators at the Royal College of Emergency Medicine will write to all trainees who are within four months of completion of training, who have passed the FRCEM exam, sending:

- Guidance as to what documentation is required by the College

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- A CCT/CESR-CP application form

The College will also advise the GMC Certification Department of the names of all trainees expected to finish their training and they will contact trainees directly with advice as to how make an online application to them.

Trainees must be signed off by the Specialty Workforce team with a final ARCP 6, before submitting a completed and signed CCT application form. This must be accompanied by an up to date CV. **Please note the dates of posts held must be the same on the CCT/CESR application and the CV.** Once submitted, the Head of School will verify completion of training and sign the CCT/CESR-CP application, before the application is forwarded to both the College and the GMC. It is the trainee's responsibility to collect this documentation and return it the Specialty Workforce team in a timely fashion.

Once all the required documentation is received by the College they will check that trainees have completed the minimum required years of recognised training, that all parts of the programme and all required exams have been completed, and that they have satisfactory ARCPs for each year of training. One of the College professional leads will approve the application on behalf of the Training Standards Committee.

Once approved a recommendation is made to the GMC. The GMC will link the College's recommendation with the online application from the trainee. In most cases the applicant is then admitted to the specialist register but the GMC does occasionally ask for the training file for the purposes of quality assurance.

More information is available at:

<http://www.rcem.ac.uk/Training-Exams/Training/General%20Training%20Information>

Further information from the GMC can be found here:

[http://www.gmc-uk.org/doctors/cctonline\\_page\\_1.asp](http://www.gmc-uk.org/doctors/cctonline_page_1.asp)

### Support Systems

HEKSS committed to ensuring the welfare of its trainees, and wants to ensure that all trainees studying with HEKSS have the best possible chance of success during their training.

We at HEKSS maintain and run a number of programmes and services which aim to ensure trainees are supported at all stages:

- Less Than Full-Time Training
- Maternity Leave
- Deferring the start of specialty training
- Study leave
- Support for trainees in difficulty
- Inter-Deanery transfers
- Careers

For further information please see the HEKSS website

<http://www.ksseducation.hee.nhs.uk/trainee-support-2/>

There are a number of people who are able to provide support to you whether it is pastoral or career advice:

- Educational supervisor
- Clinical supervisor
- College Tutor
- Head of School
- Training Programme Director
- Specialty Workforce team
- Trainee Representative(s)

HEKSS is committed to supporting doctors in training who are in difficulty or need some extra support. Aside from this ALL trainees are monitored for satisfactory progress, not just those experiencing difficulties.

If you have concerns about your own progress get in touch early, don't wait! Talk to:

- Educational Supervisor (in the first instance), or
- Clinical Tutor
- HEKSS School Team

Doctors who may need additional help are discussed by the Training Support Group to ensure all routes of support are explored.

If your ability to progress is at risk, your Head of School and the Training Support Group will be kept informed of your progress. They are able to offer additional support if required.

Should you need support due to an exam failure, HEKSS will endeavour to provide you with additional training time. You do however need to demonstrate that you have attempted the exam and have been proactive in your training throughout the year.

Trainees will always be fully informed and involved at all stages of support.

The aim of additional support is to get you 'back on track' and for training to continue successfully.

### **Careers Support**

HEE KSS careers team consists of a small group of qualified careers advisers. Who are non-clinicians, with wide-ranging experience in giving careers guidance to medical trainees.

All HEE KSS trainees are entitled to careers support and we work within a three tier process, of which we are the third tier of support. This means that careers guidance within HEE KSS is provided primarily by Education Supervisors, Programme Directors, Career Leads and Specialty champions within each NHS Trust. The careers team support this work by providing confidential one to one drop-ins across the region.

For further information: <http://www.ksseducation.hee.nhs.uk/about-careers/>

## **BMA**

The BMA can offer, career advice, medical advice and confidential counselling to its members. You can find further information on career advice services here:

<https://www.bma.org.uk/advice/career>

For information on doctors health and well-being please look here:

<https://www.bma.org.uk/advice/work-life-support>

## **Relocation Expenses**

The London Operations team is responsible for processing all Relocation Expense claims (covering removal and excess travel expenses) for all London and KSS based trainees on a recognised training programme. Claims should be forwarded to the Relocation Team based at Stewart House. Please note that the Relocations department does NOT reimburse travel related to on-call commitment, clinical travel or interview related travel. HEE's objective will be the timely reimbursement of a trainee's verified entitlement to expenses. However before incurring any expenses for which you anticipate submitting a claim to the relocation team, please complete a relocations eligibility form and return for authorisation, without an authorised form a claim will not be processed.

For further information: <http://www.lpmde.ac.uk/training-programme/training-matters/relocation-and-excess-travel-claims>

## **Less than full time training**

Less than Full Time (LTFT) Training in the Health Education Kent, Surrey and Sussex area allows doctors and dentists to work less than full-time in posts that are fully recognised for training. HEKSS supports access to Less than Full Time Training through slot sharing and, if this is not feasible, trainees may need to train on the basis of reduced sessions in a full time placement.

The intention of flexible training is to keep doctors in training where full-time training is not practical for well-founded individual reasons.

Further information on flexible training can be found at the following site:

<https://www.ksseducation.hee.nhs.uk/specialty/support/ltft/>

## Annual Review of Competence Progression (ARCP) and Revalidation

### Interim Review

Your interim review is a formal face-to-face meeting where a panel including at least one of the Training Programme Directors will review all the evidence in your portfolio partway through your training year. This allows the panel to check you are on track for a satisfactory ARCP outcome. It also allows you the time to discuss your training and experience with the consultant who is not your assigned educational supervisor

Date – TBC – Feb/Mar 2017

### ARCP

Your Annual Review of Competence Progression (ARCP) will take place generally towards the end of the training year. Your portfolio needs to be up to date at least 2 weeks before your review date, where the panel will then review it over the week and meet for the ARCP meeting as above. Although this is an electronic process, you may be called for interview.

You will be assessed for the time you have spent in programme at that level of training. – i.e., if you are in the programme for only 3 months you will be expected to achieve competences relevant for that period of time.

By the time of your ARCP, you must have completed all the requirements for that year of training.

The ARCP's are centrally assessed by a panel consisting of Head of School, Training Programme Director, Lay Chair, External Representative and Military or Academic Representative where required.

Please note that registering with your specialty exit college is a Gold Guide requirement: please ensure you have registered before your forthcoming ARCP and

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speak to your local training programme director / College Tutor if you have any queries.

Newly appointed trainees should receive an Enhanced Form R from HEKSS to register their details. Trainees are then required to complete a new enhanced form R at each ARCP.

Within HEKSS, our aim is for doctors in training to be safe, to develop the habits of 'life-long' learning and to achieve appropriate standards of practice. By regulating the progress of doctors in training, the ARCP process protects patients and directs the training process.

The ARCP panel is usually made up of:

- Training Programme Director
- Trust Representative
- Lay member
- External Trainer
- Military Representative\*

\*this is only relevant if you are a military trainee.

The ARCP panel will review will look at

- Evidence summary: have achieved enough evidence of the competencies of each attachment and parent curriculum?
- ePortfolio
- Evidence itself
- Assessments /supervisors reports /MSF /log books etc
- any minimum requirements completed

The following is a list of the ARCP outcomes of which you will receive one:

Outcome 1	Satisfactory Progress – Achieving progress and the development of competences at the expected rate. This is subject to successful completion of the training period.
Outcome 2	Development of specific competences required - additional

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	training time not required	
Outcome 3	Inadequate progress by the trainee – additional training time required or trainee resigns from the programme	
Outcome 4	Released from training programme – with or without specified competences	
Outcome 5	Incomplete evidence presented – additional training time may be required	
Outcome 6	Gained all required competences - will be recommended as having completed the training programme (Early Years, Core and ACCS) and for award of a CCT or CESR/CEGPR (Higher programmes)	
Outcome 7: FTSTA or LAT Trainees	Outcome 7.1	Satisfactory progress in or completion of the LAT placement
	Outcome 7.2	Development of Specific Competences Required – additional training time not required
	Outcome 7.3	Inadequate Progress by the Trainee
	Outcome 7.4	Incomplete Evidence Presented
Outcome 8	Out of programme for research, approved clinical training or a career break (OOPR/OOPE/OOPC)	
Outcome 9	Doctors undertaking top-up training in a training post	

Any trainee that receives an unsatisfactory outcome (2, 3 or 4) or an outcome 5 will be provided with supplementary information on the ARCP outcome form which shows the reasons for any unsatisfactory outcome of training requirement to be met.

### ARCP Advice

- Don't leave your assessments to the last minute!
- Ensure your portfolio and CV are regularly kept up-to-date
- Talk to your Educational Supervisor EARLY if you are having difficulties
- Keep HEKSS informed of any changes in contact details
- If your attendance is required at your ARCP, confirm your ability to attend as soon as possible
- It is your responsibility to know what will be assessed

- If you don't provide evidence by the ARCP date, you cannot be issued with a Satisfactory Outcome, without exception.

### Revalidation

Revalidation is the General Medical Council's new way of regulating licensed doctors to give extra confidence to patients that their doctors are up to date and fit to practice.

Licensed doctors including doctors in foundation year two and specialty training will have to revalidate, usually every five years. In addition, for doctors in postgraduate training, you will also revalidate when you receive your Certificate of Completion of Training (CCT).

We expect the vast majority of trainees to revalidate without any problems, as they are already closely supervised. The process for Revalidation for trainees is aimed at ensuring that employers and educational and clinical supervisors have a process to share information when needed, so that trainees can be best supported in their revalidation process.

The GMC has agreed that the ARCP process will be used as the vehicle by which doctors in training will revalidate and there is some new and amended paperwork to ensure all the areas required for revalidation are covered in ARCP. As part of the revalidation process you will be sent an enhanced form R which you will need to complete and sign by the time of your ARCP. This paperwork will contribute to your ARCP final outcome.

HEKSS is committed to enabling its doctors in postgraduate training to revalidate by providing as much information and support as possible and will provide you with regular updates.

For further information on revalidation please visit the HEKSS website:

<http://kss.hee.nhs.uk/education-and-training/revalidation/>

### ARCP Documentation

## Checklists

When attending your ARCP you will need to provide the panel with evidence showing that you are progressing at the required rate. All the documents that you require are listed on the attached checklists and may be updated each year depending upon advice from the specialty colleges. Please be aware of the specific work based assessments that you are required to complete during each placement and year of training in accordance with the 2015 curriculum.

The year of training checklist must be completed in advance with your supervisor and made available to the ARCP panel; failure to do so may result in the delay in the issue of your outcome.

Failure to provide the required documents will result in an Outcome 5 (insufficient evidence) and you may be required to attend another ARCP.

## Enhanced Form R (part A)

You will be required to confirm or correct an online pre-populated Form R (part A) for your ARCP. This confirms your registration for Postgraduate Specialty Training.

Please ensure that you check the details thoroughly. Correct any inaccurate information and add any missing details.

## Enhanced Form R (Part B)

You will be required to complete a Part B form; this will inform the panel's decision regarding your Fitness to Practice. Failure to complete this form may delay the issue of your ARCP outcome. The Enhanced Form R (B) is your self-declaration for the Revalidation of Doctors in Training.

## Reviews

If you received an outcome 2 at your ARCP you have the right to request a review of the decision. A review is a process where an individual or a group who originally made a decision return to it to reconsider whether it was appropriate. They must take into account the representations of the person asking for the review and any other relevant information, including additional relevant evidence, whether it formed part of the original considerations or has been freshly submitted.

You must request in writing to the Chair of the ARCP panel a review, within 10 working days of being notified of the decision. The Chair will then arrange an interview with the trainee and as far as practical the other members of the original ARCP panel within 15 working days of receiving the written request. The decision of the panel reviewing the ARCP Outcome 2 award is final and there is no further right of appeal

### **Appeals**

If you receive an outcome 3 or 4 you have the right of appeal to the decision. This is a process where a different panel meet to reconsider the original Panels decision. . A trainee's request for an appeal must be made in writing to the Postgraduate Dean or nominated representative within 10 working days\* of the trainee being notified of the ARCP panel's decision and must state the grounds for appeal. This is a two stage process.

Step 1: Review: An initial meeting with Head of School and Training Programme to discuss to attempt to resolve matters. If a trainee does not accept the outcome of Step 1, they should inform the Postgraduate Dean or nominated representative within 10 working days, who will then arrange a formal appeal hearing within 15 days of receiving the written request, this is Step 2.

Appeals of Outcome 4s should automatically progress to Step 2.

## Appendices - Checklists

### ST4

#### Annual Review of Competence Progression (ARCP) Checklist for Work Place Based Assessments in EM ST4

Trainee Name: \_\_\_\_\_

NTN: \_\_\_\_\_

#### Extended Supervised Learning Events (ESLE)

Three ESLEs will be completed.

ESLEs will sample activity in all available areas of the ED and must include the resuscitation room.

The first within 3 months of commencement and the second within 6 months.

The educational/clinical supervisor will conduct the first, and at least one other consultant or equivalent will conduct another.

•	date	name
•	date	name
•	date	name

#### Curriculum topics

**Higher Major Presentations (HMP) 1-5**

**Higher Acute Presentations (HAP) 1-36,**

**Paediatric Major Presentations (PMP) 2,3,4,5,6**

**Paediatric Acute Presentations (PAP) 1,2,4,7,9,13,15,16**

Approx 50% (27 topics) to be covered in ST4 by completion of ST3-6 MiniCEX/CBD, ESLE,

Teaching and audit assessments, Evidence of learning e.g. RCEM Learning modules

Reflective entries that had a recorded learning outcome in the e-portfolio: FOAMed, teaching session, patient encounter etc.

1. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
2. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
3. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
4. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
5. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
6. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
7. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
8. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
9. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
10. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
11. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
12. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
13. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name

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14. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
15. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
16. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
17. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
18. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
19. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
20. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
21. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
22. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
23. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
24. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
25. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
26. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
27. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name

<b>Assessment in the 3 complex Paediatric Major or Acute Presentations</b> Covered by Mini-CEX or Cbd (one of which must be a mini-CEX within the first 3 months)		
•	date	name
•	date	name
•	date	name

### Ultrasound for ST4

<b>Emergency Medical Ultrasound (EMUS)</b> Section A- trainee information, theory training and log summary <b>OR</b> Level 1 USS theory course:		
1. date	2. date	3. date
name	name	name
4. date	5. date	6. date
name	name	name
Commence log book and triggered assessments for each module		
• A: AAA	date	name

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• B: FAST	date	name
• C: Vascular Access	date	name
• D: Echo in life support	date	name

### Overview by end of ST4

Structured Training Report	date
Ensure trainee is demonstrating progress against HMPs (e.g. ESLE). Formal assessment of HMPs at ST6 ARCP	YES / NO (please circle)
MSF – minimum of 12 responses (annual) with spread of participants as agreed with Educational Supervisor	date
Progress in relevant post graduate examinations:	Exams achieved
Progress towards Quality Improvement Project (QIP) or CTR (concept, title, first literature search)	YES / NO (please circle)
Progress in completion of Management Portfolio project(s)	YES / NO (please circle)
Progress toward achieving level 4 common competences, confirmed by Educational Supervisor and trainee (red and blue man symbols)	YES / NO (please circle)
Logbook on practical procedures undertaken/taught on e-portfolio	YES / NO (please circle)
Number of regional training days attended – upload certificates to e-portfolio	number
ALS or equivalent (current provider) – upload certificate to e-portfolio	date
ATLS or equivalent (current provider) – upload certificate to portfolio	date
APLS or equivalent (current provider) - upload certificate to e-portfolio	date
Safeguarding children Level 3 – upload certificate to e-portfolio	date
Local feedback completed as determined by Deanery/LETB	YES / NO (please circle)
ARCP outcome 1 or equivalent for CT/ST3	YES / NO (please circle)
Faculty Education Statement supports training progression	YES / NO (please circle)

Trainee signature:		<b>Date:</b>	
Education Supervisor signature:		<b>Date:</b>	
Education Supervisor name PLEASE PRINT			

## ST5

### Annual Review of Competence Progression (ARCP) Checklist for Work Place Based Assessments in EM ST5

Trainee Name: \_\_\_\_\_

NTN: \_\_\_\_\_

#### **Extended Supervised Learning Events (ESLE)**

Three ESLEs will be completed.

ESLEs will sample activity in all available areas of the ED and must include the resuscitation room.

The first within 3 months of commencement and the second within 6 months.

The educational/clinical supervisor will conduct the first, and at least one other consultant or equivalent will conduct another.

•	date	name
•	date	name
•	date	name

#### **Curriculum topics**

**Higher Major Presentations (HMP) 1-5**

**Higher Acute Presentations (HAP) 1-36,**

**Paediatric Major Presentations (PMP) 2,3,4,5,6**

**Paediatric Acute Presentations (PAP) 1,2,4,7,9,13,15,16**

Remaining 50% (27 topics) not covered in ST4 by completion of ST3-6 MiniCEX/CBD, ESLE,

Teaching and audit assessments, Evidence of learning e.g. RCEM Learning modules

Reflective entries that had a recorded learning outcome in the e-portfolio: FOAMed, teaching

28. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
29. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
30. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
31. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
32. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
33. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
34. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
35. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
36. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
37. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
38. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
39. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
40. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
41. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
42. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name

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43. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
44. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
45. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
46. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
47. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
48. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
49. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
50. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
51. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
52. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
53. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name
54. WBPA / Teaching / Audit / E-learning / Reflective (Please circle)	date	name

Assessment in a further **3 complex Paediatric Major or Acute Presentations not covered in ST4** Covered by Mini-CEX or CbD (one of which must be a mini-CEX within the first 3 months)

•	date	name
•	date	name
•	date	name

### Ultrasound for ST5

Progress with US log book, case studies and triggered assessments for each module

• A: AAA	date	name
• B: FAST	date	name
• C: Vascular Access	date	name
• D: Echo in life support	date	name
• E: Level 1 sign off - <b>if completed</b>	date	name

### Overview by end of ST5

Structured Training Report	date
MSF – minimum of 12 responses (annual) with spread of participants as agreed with Educational Supervisor	date
Progress in relevant post graduate examinations:	Exams achieved
Progress towards Quality Improvement Project (QIP) or CTR (Advanced stage of completion)	YES / NO (please circle)
Progress towards completion of Management Portfolio project(s)	YES / NO (please circle)
Progress toward achieving level 4 common competences, confirmed by supervisor and trainee (red and blue man symbols)	YES / NO (please circle)
Logbook on practical procedures undertaken/taught on e-	YES / NO (please circle)

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portfolio	
Number of regional training days attended – upload certificates to e-portfolio	Number
ALS or equivalent (current provider) – upload certificate to e-portfolio	date
ATLS or equivalent (current provider) – upload certificate to e-portfolio	date
APLS or equivalent (current provider) - upload certificate to e-portfolio	date
Safeguarding children Level 3 – upload certificate to e-portfolio	date
Local feedback completed as determined by Deanery/LETB	YES / NO (please circle)
ARCP outcome 1 or equivalent for CT/ST4	YES / NO (please circle)
Faculty Education Statement supports training progression	YES / NO (please circle)

Trainee signature:		<b>Date:</b>	
Education Supervisor signature:		<b>Date:</b>	
Education Supervisor name PLEASE PRINT			

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## ST6

### Annual Review of Competence Progression (ARCP) Checklist for Work Place Based Assessments in EM ST6

Trainee Name: \_\_\_\_\_

NTN: \_\_\_\_\_

ST6 WBPA	Date checked
<ul style="list-style-type: none"> <li>2 Extended Supervised Learning Events (ESLE) acting in Consultant role (one of which must be completed within the first 6 months)</li> </ul>	Date
All Curriculum completed:	Date checked
<ul style="list-style-type: none"> <li>HMP 1 – 5</li> </ul>	Date
<ul style="list-style-type: none"> <li>HAP 1 – 34 for 2010 curriculum: 36 for 2015 curriculum</li> </ul>	Date
<ul style="list-style-type: none"> <li>PMP 2 - 6</li> </ul>	
<ul style="list-style-type: none"> <li>PAP 1, 2, 4, 7, 9, 13, 15, 16</li> </ul>	
<ul style="list-style-type: none"> <li>HST PEM – 6 Complex Paediatric Presentations</li> </ul>	Date
<ul style="list-style-type: none"> <li>ARCP outcome 1 or equivalent for ST1/CT1</li> </ul>	Date
<ul style="list-style-type: none"> <li>ARCP outcome 1 or equivalent for ST2/CT2</li> </ul>	Date
<ul style="list-style-type: none"> <li>ARCP outcome 1 or equivalent for ST3/CT3</li> </ul>	Date
<ul style="list-style-type: none"> <li>ARCP outcome 1 or equivalent for ST4</li> </ul>	Date
<ul style="list-style-type: none"> <li>ARCP outcome 1 or equivalent for ST5</li> </ul>	Date

Structured Training Report	Date
MSF – minimum of 12 responses (annual) with spread of participants as agreed with Educational Supervisor	Date
FRCEM passed - upload certificate to e-portfolio	Date
CTR or QIP completed	Date
Completed Management Portfolio project(s)	YES / NO (please circle)
Number of regional training days attended – upload certificates to e-portfolio	Number
ALS or equivalent (current provider) – upload certificate to e-portfolio	Date
ATLS or equivalent (current provider) – upload certificate to e-portfolio	Date
APLS or equivalent (current provider) – upload certificate to e-portfolio	Date
Safeguarding children Level 3 – upload certificate to e-portfolio	Date
USS Level 1 sign off – upload certificate to e-portfolio	Date
Logbook on practical procedures undertaken/taught on e-portfolio	YES / NO (please circle)
Common competences: <b>23/ 25 to Level 4</b> confirmed by Educational Supervisor and trainee (red and blue man symbols)	YES / NO (please circle)
Local feedback completed as determined by Deanery/LETB	YES / NO (please circle)
Completed minimum of <b>36 months WTE</b> in Higher Training (or as agreed for Academic trainees)	YES/NO (please circle)

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Faculty Education Statement supports training progression	YES/NO (please circle)
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**The trainee must complete this form before asking the Educational Supervisor to countersign.**

Trainee signature:		<b>Date:</b>	
Education Supervisor signature:		<b>Date:</b>	
Education Supervisor name PLEASE PRINT			

## Useful Links

British Medical Association

<https://www.bma.org.uk/>

General Medical Council

<http://www.gmc-uk.org>

Inter Deanery Transfers

<http://specialtytraining.hee.nhs.uk/inter-deanery-transfers/>

Relocation Expenses

<http://www.lpmde.ac.uk/training-programme/training-matters/relocation-and-excess-travel-claims/relocation?searchterm=relocation>

CCT/CESR-CP

Information on your CCT date

[Oonah.Newbury@rcem.ac.uk](mailto:Oonah.Newbury@rcem.ac.uk)

To apply for a Certificate of Completion of Training

[http://www.gmc-uk.org/doctors/cctonline\\_page\\_1.asp](http://www.gmc-uk.org/doctors/cctonline_page_1.asp)

Information on the CCT Route

[http://www.gmc-uk.org/doctors/cctonline\\_page\\_1.asp](http://www.gmc-uk.org/doctors/cctonline_page_1.asp)

Information on the CESR (CP) Route

[http://www.gmc-uk.org/doctors/combinedprogramme\\_page\\_1.asp](http://www.gmc-uk.org/doctors/combinedprogramme_page_1.asp)

E-portfolio

Contact for queries: [Training@rcem.ac.uk](mailto:Training@rcem.ac.uk)

Website: <https://www.nhseportfolios.org>

E-Portfolio Useful Guide

Useful guides on e-portfolio use are available via the following link to the RCEM website:

<http://www.rcem.ac.uk/Training-Exams/E-portfolio>

There you will find downloadable documents on:

- ARCP checklists
- Trainee user guide to e-Portfolio
- Guide on how to add your posts and supervisors to your e-Portfolio account
- E-portfolio feedback form

FCREM Exam

<http://www.rcem.ac.uk/Training-Exams/Exams>

Royal College of Emergency Medicine

Membership Enquiries: <http://www.rcem.ac.uk/College/Membership/default.asp>

General Enquiries: [Training@rcem.ac.uk](mailto:Training@rcem.ac.uk)

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### RCEMLearning

The College has an eLearning resource, **RCEMLearning**, content of which has been mapped to the curriculum.

For access information, please contact Sharlene Lewington:

[Sharlene.Lewington@rcem.ac.uk](mailto:Sharlene.Lewington@rcem.ac.uk)

### Royal Society of Medicine

<http://www.rsm.ac.uk>

### Pre Hospital Emergency Medicine -

<http://www.ibtphem.org.uk/IBTPHEM/Welcome.html>