Initiatives in Emergency Medicine from famine to relative feast

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In 2012

- 55% HST places filled
- ‘half HST on antidepressants’
- GMC feedback 4-9 red outliers per department

In 2016

- Full rotation
- GMC satisfaction, nationally 1st ACCS, 2nd HST
- 2nd for FRCEM results
- 3rd for ARCP outcomes
Initiatives

Expansion of Workforce

Regional

Wessex Multidisciplinary School of Emergency Medicine
Regional workshop 2012

**Worklife**

- ‘Service provision’
  - High intensity shifts
  - Antisocial shifts
  - 1 in 2.5 weekends
  - Difficulty getting training
  - No ‘life’

**Training**

- ‘Prescriptive and tickbox’
  - 18+ WPBA per year
  - Patient quotas
  - Level 1 US
  - Management, audit
  - Exit exam
  - Courses, e-learning
Regional workshop output

**Worklife**

* Max shift 8-10 hours
* Max weekends 1:3
* Training shift per week
  * WPBA
  * Minor
  * paeds

**Training**

* Focus regional training
* ES training
* Recruit examiners
* Training shifts
* Feedback to RCEM
Workforce Expansion

- Specialty doctor development
- Majors Assisting Practitioner (MAPs)

LETB Funding
Workforce Expansion

- Specialty doctor development
  - ‘night rota competency programme’
  - Annual
  - TPD since 2014
  - CPD and CESR support
AHP development

- Emergency Nurse Practitioner (ENP) for years
- Consultant Nurse Programme

Middle ground

‘Majors Practitioner’ role

- Protocol based remit
- Regional training programme
- Trust based practice
<table>
<thead>
<tr>
<th>Role</th>
<th>Eligibility/Qualifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Majors Acute Practitioner</td>
<td>Independent, shop floor supervision</td>
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</tbody>
</table>
| Majors Assistant Practitioner (MAP) | Supervised  
Top 10 presentations  
Cannot discharge |
| Minors ENP                    | Independent in minor injury/illness  
Eligible: 5 years EM, degree, physical exam course |

AHP development
Workforce Expansion

* Majors Acute Practitioner/Advanced Clinical Practitioner
  * Consultant Nurse led in PHT
  * Bespoke training to independent practice
    * Trust funded
    * Mentoring by EM consultants
    * Linked to RCEM curriculum
    * Benchmarked by senior ENP trainers and School

* work shared with RCEM

* RCEM Accredited ACP Programme 2016
Advanced Clinical Practitioner training

- Independent at ST3/4 equivalence all areas
- 5 years training

ACP3

ACP2

ACP1

Minors ENP /Emergency Care Practitioner (Paramedic)/MSK Physio

• Supervised (ST1/2)
Regional ACPs

* TPD for AHP since 2014 on School Board
  - School visits, ARCP, trainee rep
  - Support governance

* MAPs now become ACP1
* HEE, Wessex funding 14 ACP1 (+ 3 trust funded)
  - First regional programme
  - 1 from AMU
RCEM Changes

* Recoupled Core and HST
* Expansion EM NTN
  * ACCS/ST3 2 posts with new training site
  * Paediatric and Pre Hospital EM subspecialty posts
* 2015 Curriculum
  * New WPBA – ELSE
  * Faculty Governance Statement
Extended Supervised Learning Event* (SPA)
2 hours shop floor observation
1 hour feedback – clinical and non-technical skills (NTS)

2-3/year ST3-6
reduces HST WPBA requirements to ~ 6 per year

ESLE Feedback

* Part 1 - clinical narrative & case discussion

* Part 2 – NTS assessment & developmental feedback

* A – level early core trainee
* E – senior core, basis HST
* H – level expected at HST
* C – consultant level
PART 2

Review of Non-technical skills

This is an opportunity to consider the session as a whole. The focus is on the skills and behaviours that may be observed during interaction with other team members, between patients or across the session. Please use the tool below to reflect Non-Technical Skills performance. Please rate those domains observed. Please then summarise the evaluation and agree learning objectives that follow.

**Evaluation of EM physicians' non-technical skills** For rating options please see below Please indicate if Not Observed “N”

<table>
<thead>
<tr>
<th>Element</th>
<th>Rating</th>
<th>Observations</th>
</tr>
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<tbody>
<tr>
<td><strong>Management &amp; Supervision</strong></td>
<td></td>
<td></td>
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<tr>
<td>Maintenance of Standards</td>
<td></td>
<td></td>
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<tr>
<td>Workload Management</td>
<td></td>
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<tr>
<td>Supervision &amp;</td>
<td></td>
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<tr>
<td>Assessment capabilities and identifies knowledge gaps.</td>
<td></td>
<td>Provides opportunities for teaching and constructive</td>
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</table>
**ELSE Feedback**

- Liked by trainees and consultants
- Wealth information
- Facilitates developmental feedback
- Supports NTS and leadership development

http://www.rcem.ac.uk/RCEM/Exams_Training/UK_Trainees/Assessment_Schedule
Faculty Governance Statement

- Role for expert training faculty opinion in judging progress
- Used in support of ES statement
- Reviewed at ARCP
- NB/ Must be clear trail of action and supervision to support decision making.
And finally…..

Get education right – morale whole team improves