Dr Kathy Torlot
Training Programme Director for Core Training in Anaesthetics/ACCS

ACCS
Acute Care Common Stem
The Wessex Deanery
ACCs routes of entry and training pathways

Entry to Anaesthetic training is either via CT1 Anaes or ACCs CT1. A national assessment of knowledge is required for progression. This is by completion of FRCA Primary by end of CT2 and FRCA Final by end of STr4.

Entry to EM training is only via ACCS CT1. Assessment of knowledge is by completion of MCEM B&C by end of CT3 and FCEM by end of HST. There is competitive entry into HST by national recruitment.

Entry to AM training is either via CMT1 or ACCS CT1. Assessment of knowledge is by completion of the MRCP by end of CT3.

Assessment of competence is shown using WPBA tools such as Mini-CEX, CBs, DOPS, ACAT and MSF. In Anaes and EM some of these WPBA tools are summative and are therefore required for progression at ARCP. The overall assessment process combines the relevant college examination as the primary assessment of knowledge with the workplace based assessments, which are designed to monitor how that knowledge is applied in clinical practice. It is necessary for trainees to engage fully with the assessment process to ensure that an evidence base of competence is accrued.
ACCS Training

Routes into:

- Anaesthetics
- Acute Medicine
- Emergency Medicine
- ICM
Hospitals on the rotation

- Southampton
- Portsmouth
- Poole

- 3 years in each
Why ACCS?

- Only route in for EM
- Involved with the sickest patients in the hospital
- If you are planning a career in ITU then excellent route to get training required
- It could delay your final career decision, but have to declare a preference at application
- There may be a possibility to change “master” specialty
ACCS

- Wessex;
- 6 months AM with 6 months EM
- 6 months Anaes with 6 months ICM
- Usually all in the same Trust
### Wessex Recruitment ratios 2010

#### ACCS

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Number of posts</th>
<th>Number of applicants</th>
<th>Number short listed</th>
<th>Number invited to interview</th>
<th>Number interviewed</th>
<th>Number accepted</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCS AM</td>
<td>2</td>
<td>57</td>
<td>20</td>
<td>58 in total</td>
<td>47 in total</td>
<td>2</td>
</tr>
<tr>
<td>ACCS Anaes</td>
<td>3</td>
<td>141</td>
<td>21</td>
<td>58 in total</td>
<td>47 in total</td>
<td>3</td>
</tr>
<tr>
<td>ACCS EM</td>
<td>11</td>
<td>97</td>
<td>46</td>
<td>58 in total</td>
<td>47 in total</td>
<td>11</td>
</tr>
</tbody>
</table>
National selection 2011

- Standardised application form
- Standardised short listing criteria
- Local interviews in 2 Deaneries
- National offers day for all specialties??
- Trainees don’t have to accept e.g. Anaesthesia post before ACCS offers are out or vice versa
Website

- www.accsuk.org.uk
- www.wessexdeanery.nhs.uk
- School of Emergency Medicine
USEFUL CONTACTS

- **Head of ACCS School:**
  - Dr Julia Harris, Cons EM Southampton

- **ACCS AM:**
  - Dr Chris Roseveare, Cons AM Southampton

- **ACCS ICM:**
  - Dr Matthew Williams, Cons ICM Portsmouth

- **ACCS EM:**
  - Dr Gary Cumberbatch, Cons EM Poole

- **ACCS Anaes:**
  - Dr Kathy Torlot, Cons Anaes Portsmouth
My e-mail address

- kathy.torlot@porthosp.nhs.uk