Preparing Foundation Doctors for Acute Immediate Care

Dr. Gareth SD Morrison

Consultant in Anaesthetics / ICM

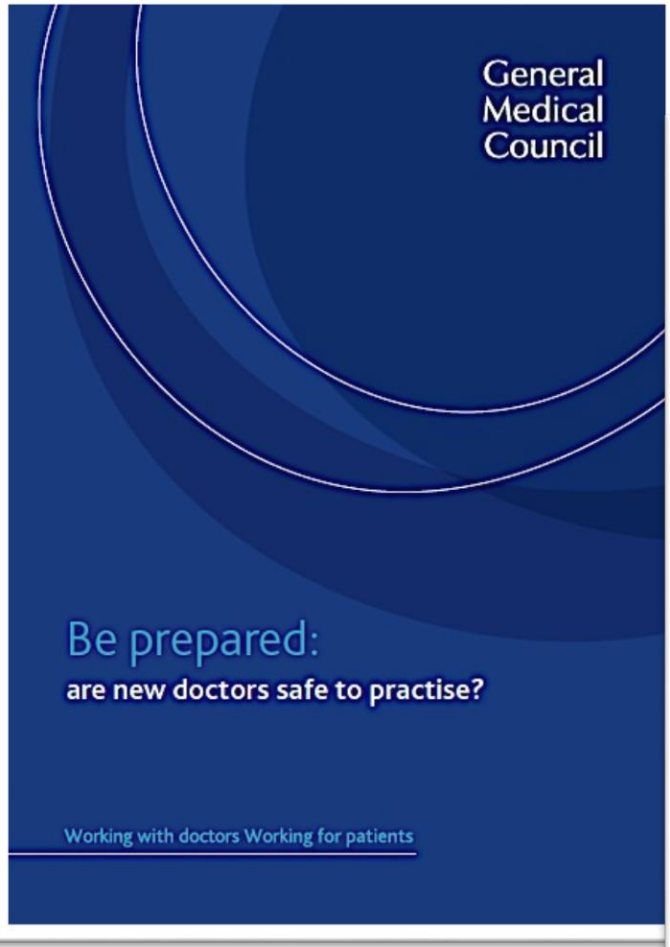
ACCA

Knowledge of aspects of acute care in trainee doctors

Confidential inquiry into quality of care before admission to intensive care

The transition from medical student to junior doctor: today's experiences of Tomorrow's Doctors

The preparedness of UK graduates in acute care: a systematic literature review



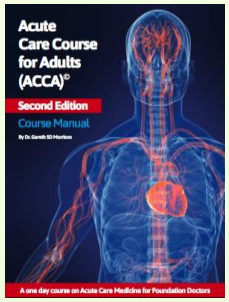
The Telegraph

New doctors feel unable to treat seriously ill patients: research

patient safety

Components of ACCA

Pre course



Course manual / Pre course confidence levels

Course day

6 one hour simulated skills stations

Integration and problem solving

Ensuring standards

5 station OSCE

Single best answer examination

Post course confidence levels

Acute Care Course for Adults (ACCA©)
COURSE MANUA
A one – day course on Acute Ca
Medicine for Foundation Docto
Produced by Dr. Gareth SD Morrison
Acute Care Course for Adults (ACCA)©
Second Edition
Course Manual
By Dr. Gareth SD Morrison
A one day course on Acute Care Medicine for Foundatio
Course Manual
Acute
Care Course for Adults (ACCA©)
Third Edition
ACCA
Acute Care Course for Adults (ACCA)
COURSE MANUAL
Fourth Edition
Dr. Gareth SD Morrison
Acute Care Course for Adults (ACCA)
Course Manual
Acute Immediate Care Medicine for Foundation Doctors
ACCA
Fifth Edition
Dr Gareth SD Morrison

Module 1: Early warning scores and the identification of the 'at risk patient'

Module 2: Assessment of the 'acutely unwell patient'

Module 3: Airway and oxygenation

Module 4: Respiratory failure and ventilation

Module 5: Circulatory failure

Module 6: Acute Kidney Injury

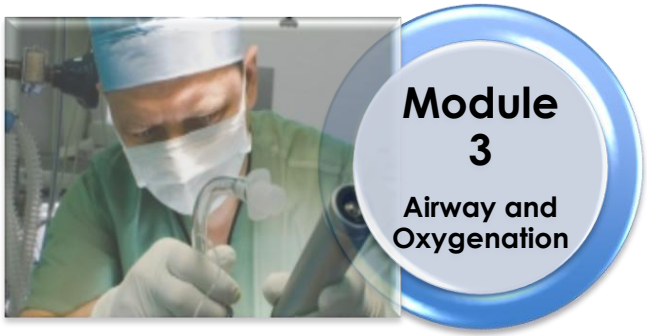
Module 7: Neurological failure

Module 8: Acute pain management

Module 9: Sepsis

Module 10: Equipment and practical skills

Module 11: Clinical communication



Airway and Oxygenation Learning Outcomes

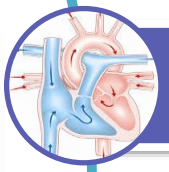
By completing this Module, the learner:

Learning outcome	Tick when read	Tick when understood
Describes the signs of airway obstruction	☐	☐
Demonstrates safe use of simple airway manoeuvres / adjuncts (head-tilt, chin lift, suction, oropharyngeal, nasopharangeal airway)	☐	☐
Describes the indications and rationale for safe oxygen therapy in the critically ill patient	☐	☐
Demonstrates safe and effective use of laryngeal mask airway	☐	☐
Demonstrates basic treatment for simulated choking	☐	☐
Describes the indications for and method of needle cricothyroidotomy	☐	☐
Describes the indications for and method of surgical cricothyroidotomy	☐	☐
Demonstrates safe and effective management of patients with tracheostomies.	☐	☐

ACCA Skills Stations (1 hour each)

Airway and oxygenation

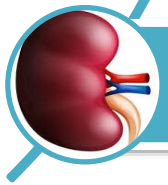
Respiratory failure



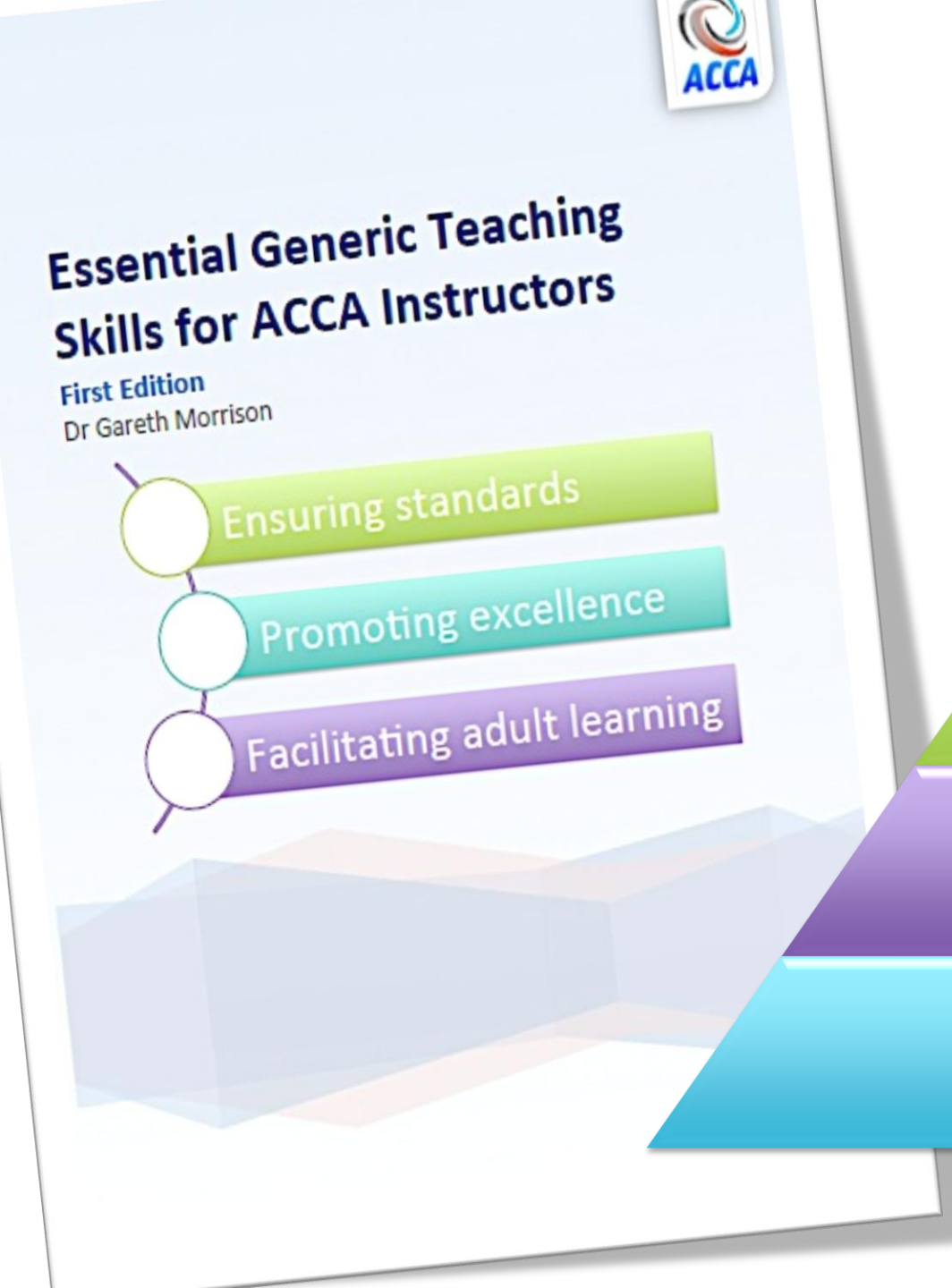
Circulatory failure

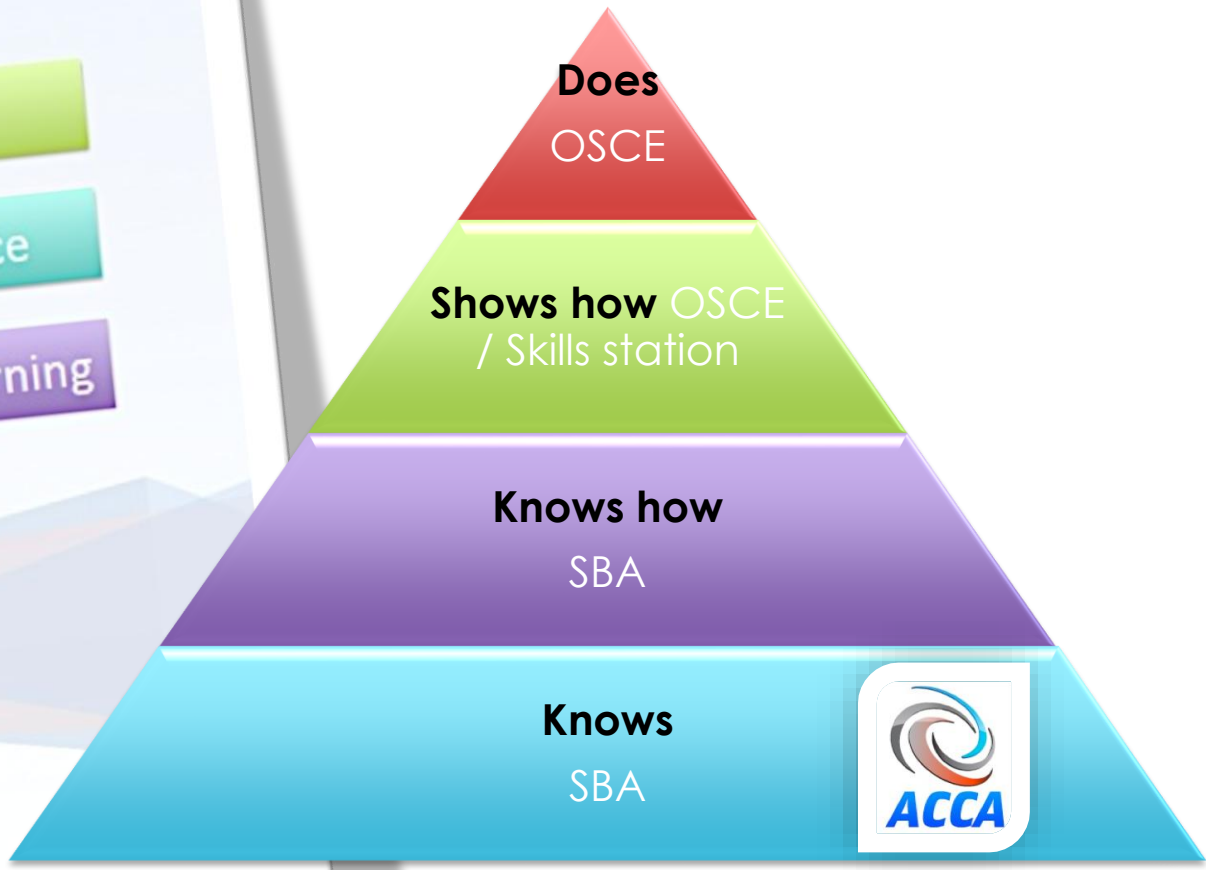
Neurological failure

Sepsis

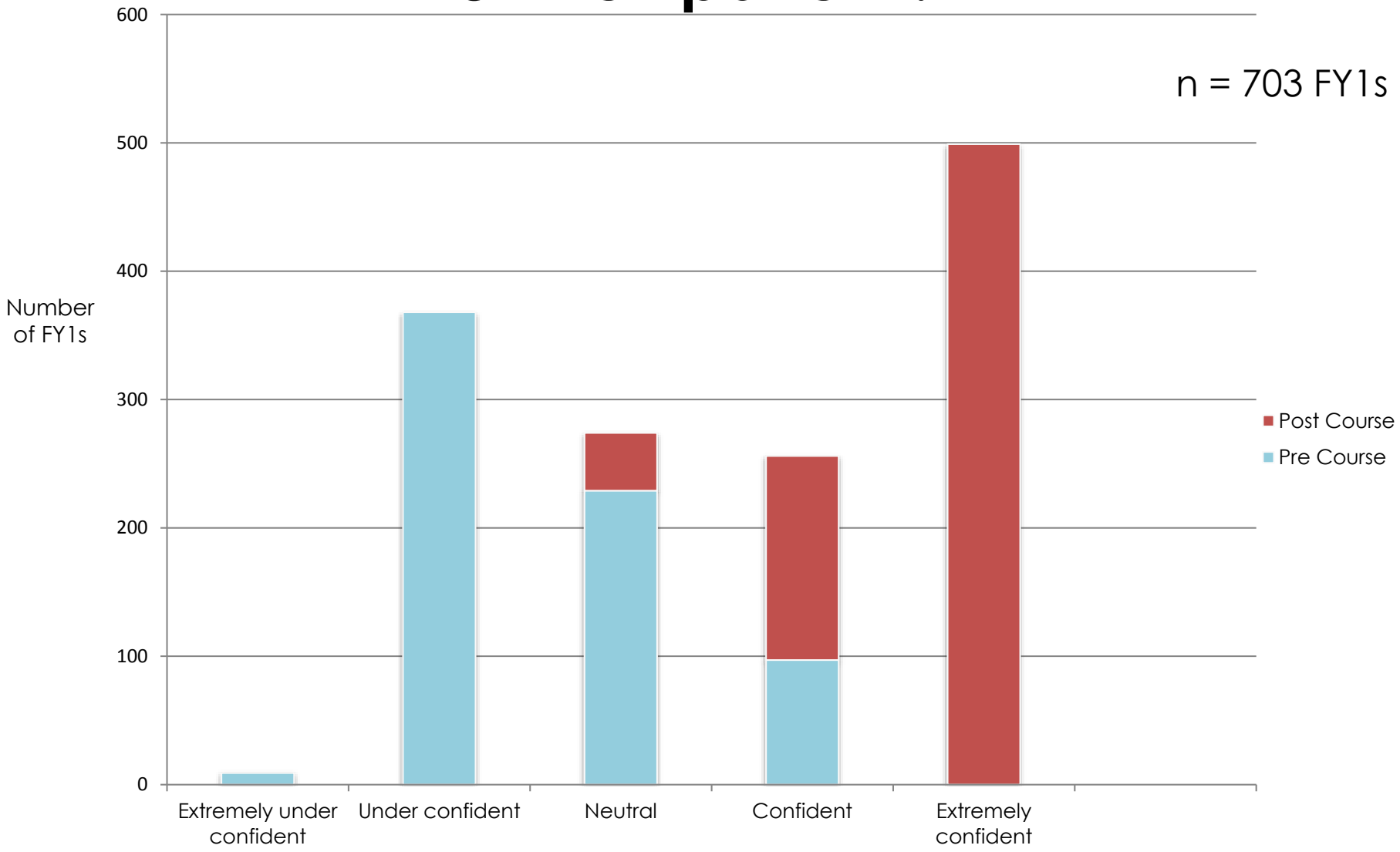


Acute Kidney Injury

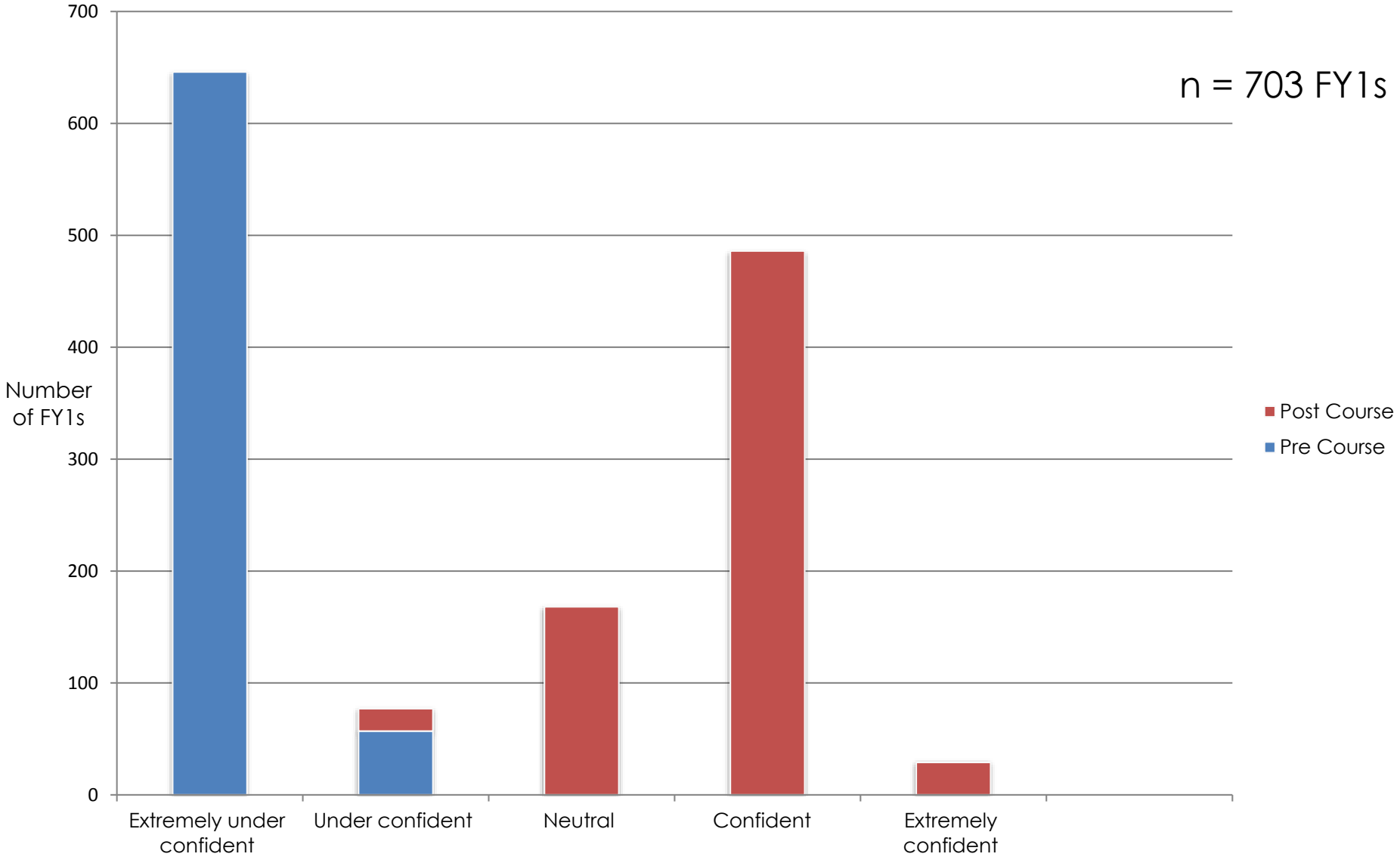

Essential Generic Teaching Skills for ACCA Instructors
First Edition
Dr Gareth Morrison
Ensuring standards
Promoting excellence
Facilitating adult learning

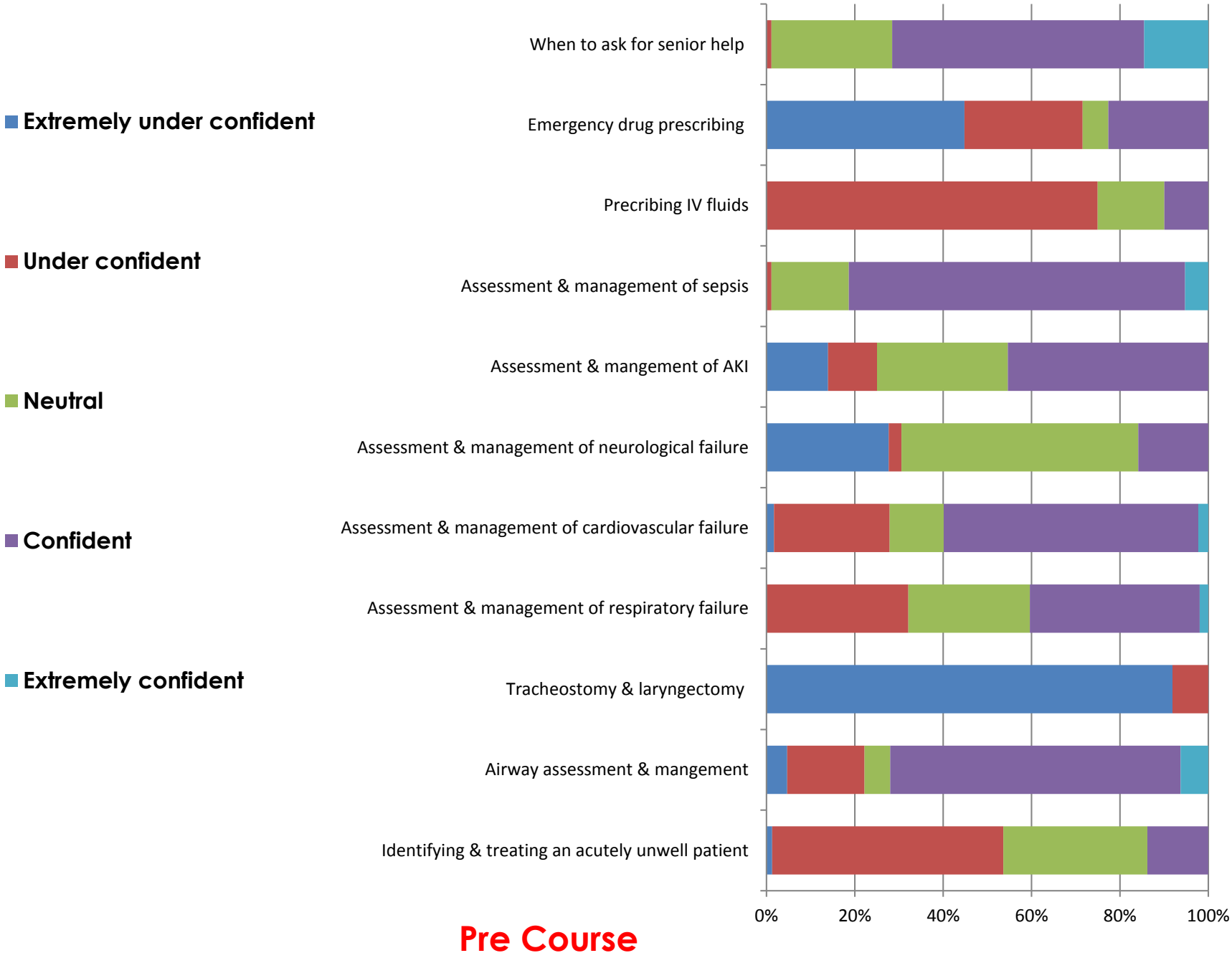

Does
OSCE
Shows how OSCE / Skills station
Knows how
SBA
Knows
SBA

How Confident are you in Identifying and Systematically Assessing an Acutely Unwell patient?

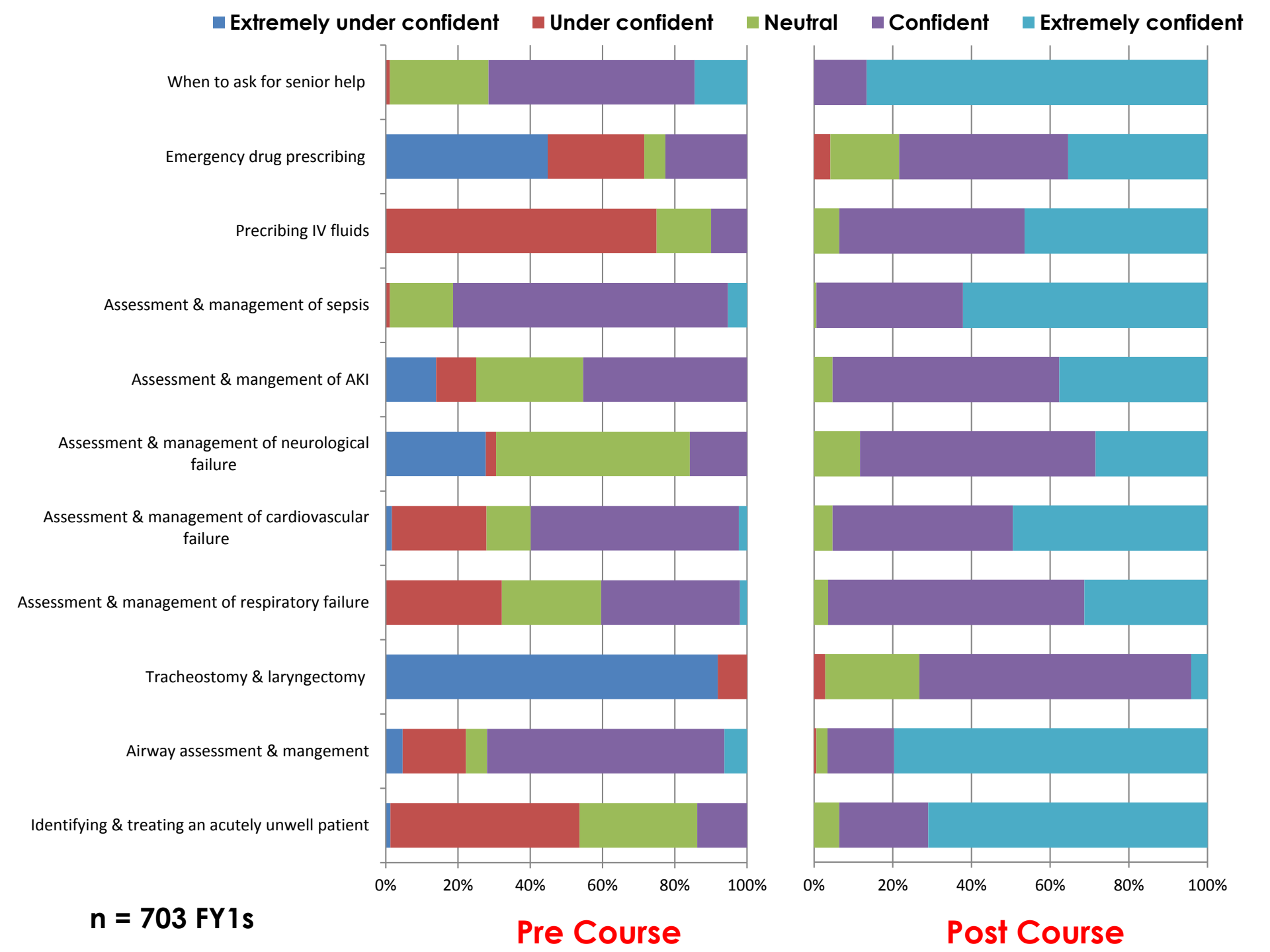


How Confident are you in Assessing and Managing a Patient with a Tracheostomy?




Extremely under confident
Under confident
Neutral
Confident
Extremely confident
When to ask for senior help
Emergency drug prescribing
Precribing IV fluids
Assessment & management of sepsis
Assessment & mangement of AKI
Assessment & management of neurological failure
Assessment & management of cardiovascular failure
Assessment & management of respiratory failure
Tracheostomy & laryngectomy
Airway assessment & mangement
Identifying & treating an acutely unwell patient
0%
20%
40%
60%
80%
100%

Pre Course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Tracheostomy & laryngectomy
Airway assessment & mangement
Identifying & treating an acutely unwell patient
0%
20%
40%
60%
80%
100%
0%
20%
40%
60%
80%
100%
n = 703 FY1s
Pre Course
Post Course

Back

ACCA

Sustainability
Straight Ahead

ACCA

ACUTE CARE COURSE FOR ADULTS (ACCA©) EXAMINATION RESULTS

MULTIPLE CHOICE (MCQ) EXAMINATION

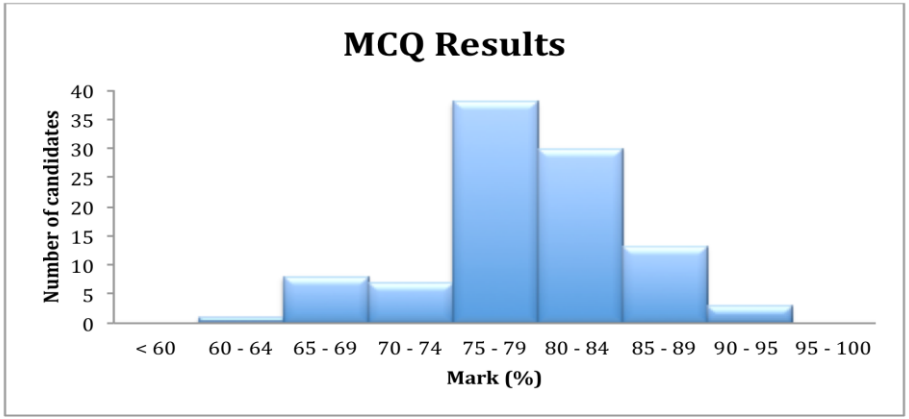
Candidate name:	**Dr. XXXXXXX**
Your MCQ Examination mark:	**90%**
Course average:	**79.04%**
Highest mark	**92%**
Lowest mark	**64%**
Position:	**2nd = / 100**
Outcome [PASS / BORDERLINE / FAIL]:	**PASS [Outstanding]**
Pass rate	**86%**
KR 20*:	**0.89 (Excellent reliability)**
Pass mark:	**Pass mark set by modified Angoff Method = 78% PM – 1 SEM (to ensure validity) 78 – 3.5 = 74.5 (rounded up to 75%)**

Question no. and topic examined	Your mark / 5	Pass mark set by examiners / 5	Group Average Mark / 5	Difficulty index **P Value
Q1: Airway (S)	5	4.15	3.8	0.76
Q2: Airway (M)	5	4.2	4	0.8
Q3: Breathing (S)	4	4.1	3.8	0.76
Q4: Breathing (M)	4	3.8	3.4	0.67
Q5: Circulation (S)	5	4.6	4.3	0.86
Q6: Circulation (M)	5	4.4	4.7	0.94
Q7: Circulation (M)	4	3.8	3.7	0.74
Q8: Renal (S)	5	4.35	4.4	0.88
Q9: Renal (M)	4	3.7	3.7	0.75
Q10: Neuro (S)	5	3.95	4.1	0.83
Q11: Neuro (M)	3	4.45	4.1	0.83
Q12: Anaphylaxis (S/M)	5	3.85	4.4	0.88
Q13: Sepsis (S)	5	3.4	2.4	0.49
Q14: Sepsis (M)	4	3.75	3.3	0.7
Q15: Drugs (S/M)	4	3.8	3.8	0.75
Q16: Monitoring (S/M)	5	4.5	4.3	0.86
Q17: Pain (S)	5	3.9	4.5	0.9
Q18: Pain (M)	5	4.1	4.7	0.93
Q19: Drugs (S/M)	5	3.6	4	0.8
Q20: Equipment (S/M)	5	3.6	3.4	0.69

(S): Question assessing basic science knowledge
(M): Question assessing clinical application / management
(S/M): Question assessing both basic science and clinical application

*KR 20 is a coefficient of reliability. It will generally increase as the intercorrelations among test items increase, and is thus known as an internal consistency estimate of reliability of test scores. Values > 0.8 are considered excellent.

* *P Value = the percentage of the total proportion of marks achieved for a given question by the whole group. Values ≥0.9 suggest an easy question. Values between ≥0.7 ≤0.9 suggest a suitable standard question, which will differentiate candidates. A P value ≥0.3 ≤0.7 suggest a difficult question. If a value ≤0.1 is obtained, the question is removed from the total score.



A bar chart illustrating the spread of marks obtained by BHSCT candidates

OBJECTIVE STRUCTURED CLINICAL EXAMINATION (OSCE)

Your mark (out of 20)	**19**
Group average (out of 20)	**16.7**
Group highest mark	**20**
Group lowest mark	**11**
Position	**8th = / 100**
Outcome [PASS / BORDERLINE / FAIL]	**PASS [excellent]**

Examiner's comments:

[GM]
Excellent systematic assessment.
Very impressed with CXR interpretation.
Was the only candidate who checked patency of PCA – excellent.
Very safe and competent approach.

OVERALL OUTCOME FOR THE ACUTE CARE COURSE FOR ADULTS

PASS (Certificate of Successful Completion Awarded)

If you wish to discuss any of your results, please contact Dr. G. Morrison (gsdmorrison@doctors.org.uk), who is happy to go over the examination with you.

WHO?
BENEFITS

FY1 doctors

Doctors in training

Hospitals + Deanery

Especially
feedback
enthusiastic
Really
Extremely
encouraging
things
station
F1
friendly
areas
also
Course
approachable
interest
deserves
brilliant
EXCELLENT
great
Bernie
teaching
ease
particular
lady
good
resus
staff
praise
feel
officer
faculty
teachers
took
fantastic
made
teacher
Anaesthetic
day
care
airway
pathophysiology
stations
registrar
informative
enjoying
others
expected
completely
Thanks
organising
improve
certainly
starting
beneficial
enjoyed
encountered
much
lovely
attend
dealing
work
just
scenarios
engaging
career
individuals
appeared
name
manual
refreshing
ICU
run
need
kind
absolutely
vested
lot
F2
knowledgeable
helpful
well
www
student
involved
team
however
material
reinforcing
terribly
nurse
Emma
group
exam
willing
lectures
many
thank
forget
explain
explaining
delivered
experience
intimidating
highly
medical
doctor
enough
resuscitation
league
Overall
holding
member
consultants
nurses
F1s
time
recommend
taken
put
education
misfortune
different
cheerful
sure
coupled
attention
never
ALERT
little
real
skills
confident
attending
found
know
life
knowledge
dedication
outstanding
basic
1010
rubs
points
useful
learning
situations
hard
ACCA
see
taught
felt
important
acute
therefore
junior
questions
ran
best
supportive
relating
8
taking
critical
ended
commencing
enthusiasm

Thank You

Questions?