# Australasian College for Emergency Medicine

# FACEM Training Program Training Stage 4 Learning Outcomes – Emergency Departments and Special Skills Placements

AC808 V2.1

## Document Review

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| Timeframe for review: | Every two years, or earlier if required |
| Document authorisation: | Council of Education |
| Document implementation: | Accreditation Subcommittee |
| Document maintenance: | Manager, Accreditation |

## Revision History

| Version | Date | Pages revised / Brief Explanation of Revision |
|---|---|---|
| V1 | Nov 2021 | Approved by Council of Educarion |
| V2 | Dec 2023 | Review – changes to the intent and suggestions |
| V2.1 | May 2025 | Amendments throughout to reflect changes to training program titles and membership categories "EMC/D/AD" to "Associateship". |

## Copyright

## Training Stage 4 requirements:  Leadership and management skills

Training Stage 4 (the final 12 months of FACEM training) enables trainees to focus on the development and consolidation of management and leadership skills.  By the end of Training Stage 4, trainees should be competent and confident in the operational management of the floor, including patient flow, the clinical supervision of junior medical staff, and departmental management encompassing clinical governance and quality assurance. Whilst these skills are best enhanced during ED training, it is recognised that placements in appropriate non-ED settings can also provide opportunities to focus on leadership skills.

During Training Stage 4, trainees **must** complete:

- six (6) FTE months in an Emergency Department accredited by ACEM and approved for TS4 training; s

    And

- six (6) FTE months in an elective placement in one or a combination (3 months / 0.5 FTE) of the following:
    - any ACEM-accredited TS4 approved ED; <u>or</u>
    - a Critical Care placement(s) in Anaesthetics and/or Intensive Care that meets the TS4 learning outcomes; <u>or</u>
    - any ACEM accredited non-ED placement that meets the TS4 learning outcomes.


There are 2 sections in this document:

- ED/PED TS4 accreditation Requirements

- Non-ED TS4 accreditation Requirements

# 1.    TS4 Core and Elective ED

## 1.1    Learning outcomes relevant to Emergency Departments accredited for TS4

| TS4 ED – Eligibility: Casemix |
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FACEM Curriculum Graduate Outcomes:

Medical Expertise:

- Deliver safe and effective care to all presentations and through all stages of the patient's journey in the emergency department.

- Utilise strategies to prioritise tasks and optimise decision making to deliver the highest quality patient care, often with limited available information.

Prioritisation and Decision Making:

- Establish optimal rapport, and communicate effectively in complex circumstances, with speed and accuracy, with patients of all ages and cultures, their families/whanau and caregivers, and colleagues of all disciplines.

TS4 Learning Outcomes:

### Complexity and acuity

- Prepare a critically unwell patient for transfer, arrange the transfer, and, when required, undertake emergency escort of unstable patients for definitive management. (ME)

- Lead resuscitation in any scenario. (T&C)

- Adapt skills to any patient presentation of any complexity (ME)

- Adapt communication skills to any patient presentation and apply principles of appropriate and professional communication in difficult interactions with the healthcare team. (Comm)

- Obtain informed consent from patients for complex and high-risk interventions. (PROF)

- Prioritise the assessment and management of a patient with a critically acute presentation. (P&DM)

- Simultaneously assess and manage multiple patients of any age with complex presentations. (P&DM)

- Contribute to the creation of tailored management plans with a focus on complex patients with recurrent presentations, applying additional management strategies when patients are identified with extra vulnerability risk factors. (HA)

- Take responsibility for ceasing resuscitation appropriately in a complex presentation. (HA)

- Lead the discussion with patients and their family/whānau and/or carers regarding the medical decisions and goals for end of life care. (HA)

### Cultural Safety

- Demonstrate understanding of and integrate considerations of cultural safety for all ethnicities and cultural backgrounds and include Aboriginal and Torres Strait Islander and Maori health workers and family/communities/whanau in patient care where possible and appropriate. (T&C)

- Communicate with patients of all ethnicities and cultural backgrounds, including Aboriginal and Torres Strait Islander and Maori patients and their families/communities/whanau, in a culturally safe and appropriate manner. (Comm)

- Challenge individual and systemic forms of discrimination within the ED and health care service. (HA)

- Support sustained relationships with external organisations to improve the delivery of health care to patients of all ethnic and cultural backgrounds, including Aboriginal and Torres Strait Islander Peoples, Maori, refugees, asylum seekers and otherwise vulnerable patients. (HA)

## TS4 ED - 1 Leadership and Management

FACEM Curriculum Graduate Outcomes:

Leadership and Management

- Provide clinical supervision, management and leadership and actively foster a culture of patient safety.

Teamwork and Collaboration

- Effectively manage and participate in an interprofessional team, particularly at times of high stress and medical emergency.

Health Advocacy

- Protect and advance the health and well-being of any individual patients, communities and populations.

Professionalism

- Practice ethically and adhere to medicolegal requirements, adopt and role model sound wellbeing practices, and actively commit to and promote the maintenance of professional standards.

TS4 Learning Outcomes:

Leadership and Management

- Apply modified risk stratification and prioritisation processes during patient surges and disasters. (P&DM)

- Lead a team debrief after a complex resuscitation. (T&C)

- Recognise the need for additional resources to aid in debriefing, particularly in highly emotional resuscitation scenarios. (T&C)

- Effectively lead the staff of an ED during a shift, including managing staffing allocations to improve patient flow, particularly during times of patient surges. (L&M)

- Demonstrate continued situational awareness with increased task loading. (P&DM)

- Encourage doctors to care for self and others. (PROF)

- Promote a zero tolerance for bullying and harassment (PROF)

- Communicate with team members to clarify and move forward from complex ethical dilemmas arising from conflicting professionalism and clinical judgements. (PROF)

- Create responses to media enquiries with the aid of standard hospital communication processes. (L&M)

- Clearly communicate with external agencies involved in public health responses, including police, local health department and other relevant agencies. (L&M)

- Advocate for the provision of appropriate resources for vulnerable patients within the ED, hospital and community. (L&M)

- Advocate for and support the provision of appropriate resources for Indigenous patients in the ED, hospital and community. (L&M)

- Support sustained relationship with external organisations to improve the delivery of health care to Indigenous patients. (L&M)

- Make recommendations based on results obtained for key performance indicators. (L&M)

- Outline the cost of health care to both the consumer and the hospital. (L&M)

- Add elements of a business case when drafting a proposal for change. (L&M)

- Advocate systematically for improved access to health care and the elimination of inequities for patients. (L&M)

- Respond actively to common public health initiatives that impact on emergency medicine, including pandemics and novel infectious diseases. (L&M)

### Complaints

- Handle patient complaints effectively, in a timely manner, with empathy and compassion. (L&M)

- Apply principles of complaint management to respond to complaints in a timely manner, including the compilation of case reports in response to an investigation into patient care. (L&M)

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## TS4 ED – 2 Teaching

FACEM Curriculum Graduate Outcomes:

Scholarship and Teaching

- Make sound judgements regarding the creation, translation, application and dissemination of medical knowledge.

- Commit to independent advancement and maintenance of own professional skills and knowledge, as well as contributing to the teaching of others.

TS4 Learning Outcomes:

### Supervision and Teaching

- Confirm and enhance admission plans created by more junior clinicians working within the Emergency Department. (ME)

- Provide skills, advice and resources to junior clinicians and other members of the ED team in order to overcome communication barriers and minimise risk to patient care. (Comm)

- Review the decisions of others to seek and address situations where either no decision or an incorrect decision has been made. (P&DM)

- Support junior clinicians in routine team leader roles. (T&C)

- Proactively assist junior clinicians in the assessment and management of their patients. (L&M)

- Facilitate the resolution of conflict involving junior staff members in the workplace. (L&M)

- Apply understanding of different types of clinical supervision to the oversight of the work of junior clinicians. (L&M)

- Role model appropriate leadership behaviours to junior clinicians including ongoing self-reflection, active advocacy against all forms of discrimination and racism, provision of culturally safe care. (L&M)

- Deliver constructive feedback to junior clinicians and peers. (S&T)

- Identify and implement strategies to assist junior team members in dealing with challenging workplace situations. (PROF)

- Monitor professional competence and currency of junior clinicians. (PROF)

- Promote values of work-life balance to mentees and junior clinicians. (PROF)

- Proactively utilise identified teaching opportunities in the ED. (S&T)

- Lead a case presentation and follow-up discussion with fellow clinicians. (S&T)

- Effectively teach procedural skills and the use of equipment. (S&T)

- Integrate simulation aids when delivering teaching as appropriate. (S&T)

- Teach culturally safe care. (S&T)

### Complaints

- Handle patient complaints effectively, in a timely manner, with empathy and compassion. (L&M)

- Apply principles of complaint management to respond to complaints in a timely manner, including the compilation of case reports in response to an investigation into patient care. (L&M)

## TS4 ED – 3 Quality Management

FACEM Curriculum Graduate Outcomes:

Leadership and Management

1. Participate in quality improvement activities to create a departmental administrative framework to support safe clinical practice.

TS4 Learning Outcomes:

### Quality Improvement and Quality Assurance

2. Apply risk stratification and patient safety principles to the daily clinical operations in an ED. (L&M)

3. Design clinical audits to measure the impact of ethnicity, gender and age on equity of access to care and health outcomes. (L&M)

4. Make recommendations based on an audit analysis. (L&M)

5. Manage the process of a departmental morbidity and mortality meeting and its application in the quality cycle. (L&M)

6. Contribute to the implementation of system changes to improve patient care as a result of an investigation into sentinel patient care event. (L&M)

7. Lead a team to collect data for quality assurance, clinical audit and other risk management activities. (L&M) Collate, analyse, and present audit data to peers. (L&M)

8. Represent the ED in a hospital-wide quality improvement activity. (L&M)

9. Ensure lessons learnt from management of complaints are discussed at team meetings, followed by written reports highlighting concerns and advice to all staff to avoid recurrence of similar incidents. (L&M).

## 1.2    Accreditation requirements relevant to emergency department accredited for TS4

The purpose of these requirements is to provide opportunities for trainees to address the detailed learning outcomes as listed above.

<div style="background-color:#a8c08c; padding:8px;">
Eligibility requirement: TS4 EDs must be accredited for FACEM training
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There are three requirements for TS4 ED accreditation beyond what is required for other stages (details are provided in the table below):
1. Leadership and Management: Trainees lead and manage a clinical team/area (manage patients, flow and junior doctors) during a shift.
2. Teaching: Trainees supervise and teach junior clinicians[1] on the floor (a minimum of two (2) (e.g. intern and resident); and deliver formal education sessions.
3. Quality: Trainees participate in and lead QI and QA activities.

| Domain TS4-ED 1: | Opportunities for Leadership and Management |
|---|---|
| **Standard TS4-ED 1.1:** | **Clinical Supervision, Management and Leadership** |
| **Criteria TS4-ED 1.1.1:** | **The training site rostering provides opportunities for clinical leadership** |

**Requirement TS4-ED 1.1.1.1:**

**Trainees lead and manage a discrete clinical team/geographical area (manage patients, flow and junior doctors in a specific area such as acute/SSU/fast track) during a shift.**

The intent of this accreditation requirement is to ensure TS 4 trainees gain experience in clinical leadership and supervision within a Fellow supported or supervised environment.

The clinical leadership and supervision role will involve facilitating and coordinating effective and efficient multi-disciplinary patient care; in particular, through direct and indirect patient management, patient flow and supervision of junior medical staff.

Exposure is required to be representative of all clinical teams / areas of the department, especially in teams / areas with the greater leadership and management opportunities within a Fellow supported or supervised environment.

TS4 trainee night shifts are excluded from fulfilling this requirement, unless the site can demonstrate on-site Fellows are clinically present to provide a supported or supervised environment.

Suggested strategies:

- A minimum number of 16 shifts per 6 FTE months of the TS4 trainee's rostered shifts must be in-charge of a clinical area (supervised or supported by a FACEM) on day/evening shifts (excluding night shifts)- this can include shift reports.

- Participation in the on-call roster (Trainee participation in the on-call roster (Accreditation Requirement 2.1.1.2) may be a valuable experience in TS4 but such participation should be **optional and only undertaken by mutual agreement between a trainee and the site**. A trainee electing to participate in the on-call roster should be do so only as the first on-call supported by a Fellow as the second on-call, and/or in New Zealand, by a Medical Officer of Specialist Scale (MOSS) with vocational registration with the Medical Council of New Zealand. (**Sites must provide a documented escalation strategy to show that trainees are appropriately prepared and supported**).

Examples of evidence:
- Six (6) months of the trainee roster with highlighted clinical team/area lead shifts and cumulative totals of these shifts for all TS4 trainees
- Feedback from internal or College surveys that demonstrates the site is meeting this requirement.

| Domain TS4-ED 2: Opportunities for Teaching |
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| **Standard TS4-ED 2.1** Scholarship and Teaching |
| **Criteria TS4-ED 2.1.1** The training site provides opportunities for TS4 trainees to teach junior clinicians (includes JMOs, interns, junior registrars, Associateship trainees, TS1-2 trainees but excludes medical students). |

Requirement TS4-ED 2.1.1.1

Trainees deliver some formal education sessions and have the responsibility to supervise and teach (a minimum of two(2)) junior clinicians (includes JMOs, interns, junior registrars, Associateship trainees, TS1-2 trainees but excludes medical students) while on shift on the floor.

The intent of this accreditation requirement is to ensure TS4 trainees are provided an environment, by way of a minimum number of junior clinicians, to allow for the provision of clinical teaching through clinical supervision.

Clinical teaching refers to the patient-based teaching that occurs through the course of the provision of patient care by junior clinicians and the supervision of such care by TS4 trainees.

TS4 trainees also need to gain experience in the preparation and delivery of education sessions within the site's structured education program.

Involvement may be within any aspect of the site's structured education program (e.g. primary or Fellowship education sessions, simulation, EMET program, junior clinicians education session, nursing education sessions etc).

Suggested strategies:
- The site rosters TS4 trainees to clinical teams / areas of the department with a minimum of two (2) junior clinicians to supervise
- The preparation and delivery of the education sessions occurs with the support of a Fellow
- The TS4 trainee receives a debriefing session post the delivery of the education session

Examples of evidence:
- Six months (6) of junior clinician rosters to confirm the presence of at least two (2) junior clinicians on shift with the TS4 trainees
- Education roster indicating the TS4 trainee involvement

| Domain TS4-ED 3:   Opportunities for Quality Improvement Activities |
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| Standard TS4-ED 3.1        Quality Management |
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| Criteria TS4-ED 3.1.1        Trainees are involved in quality improvement activities |
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**Requirement TS4-ED 3.1.1.1**

Trainees actively participate in Quality Improvement (QI) and Quality Assurance (QA) activities with opportunities to lead (with FACEM support).

The intent of this accreditation requirement is to ensure TS4 trainees actively participate in QA and QI activities at the site.

This Requirement extends, for TS4 trainees, that which is prescribed in AC549 Requirement 1.1.3.2.

Suggested strategies:

- A Fellow supported learning environment provides an opportunity for TS4 trainees to lead certain activities
- The TS4 trainees are actively involved with the preparation and delivery of morbidity and mortality (M&M) meetings
- TS4 trainees complete a clinical audit
- TS4 trainees are actively involved in policy and procedure development
- TS4 trainees are actively involved in departmental or hospital quality focus groups
- TS4 trainees are involved with drafting rosters
- TS4 trainees are involved in stakeholder communication.

Examples of evidence:

- Roster / minutes of QI and QA meetings demonstrating TS4 trainee involvement
- Examples of activities / projects completed by TS4 trainees
- CST time allocated to the TS4 trainees for QI and QA activities

# 2. TS4 Non-ED Special Skills Placements

## 2.1 Learning Outcomes relevant to Non-ED special skills placements accredited for TS4

| TS4 Non-ED - Casemix (applicable to clinical placements only) |
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| FACEM Curriculum Graduate Outcomes:<br><br>Medical Expertise:<br><br>• Deliver safe and effective care to all presentations and through all stages of the patient's journey<br>• Utilise strategies to prioritise tasks and optimise decision making to deliver the highest quality patient care, often with limited available information. |
| Prioritisation and Decision Making:<br><br>• Establish optimal rapport, and communicate effectively in complex circumstances, with speed and accuracy, with patients of all ages and cultures, their families/whānau and caregivers, and colleagues of all disciplines. |
| TS4 Learning Outcomes:<br>**Complexity and acuity**<br><br>• Prepare a critically unwell patient for transfer, arrange the transfer and, when required, undertake emergency escort of unstable patients for definitive management. (ME)<br>• Lead resuscitation in any scenario. (T&C)<br>• Adapt skills to any patient presentation of any complexity (ME)<br>• Adapt communication skills to any patient presentation and apply principles of appropriate and professional communication in difficult interactions with the healthcare team. (Comm)<br>• Obtain informed consent from patients for complex and high-risk interventions. (PROF)<br>• Prioritise the assessment and management of a patient with a critically acute presentation. (P&DM)<br>• Simultaneously assess and manage multiple patients of any age with complex presentations. (P&DM)<br>• Contribute to the creation of tailored management plans with a focus on complex patients with recurrent presentations, applying additional management strategies when patients are identified with extra vulnerability risk factors. (HA)<br>• Take responsibility for ceasing resuscitation appropriately in a complex presentation. (HA)<br>• Lead the discussion with patients and their family/whānau and/or carers regarding the medical decisions and goals for end of life care. (HA) |
| **Cultural Safety**<br><br>• Demonstrate understanding of and integrate considerations of cultural safety for all ethnicities and cultural backgrounds and include Aboriginal and Torres Strait Islander and Maori health workers and family/communities/whanau in patient care where possible and appropriate. (T&C)<br>• Communicate with patients of all ethnicities and cultural backgrounds including Aboriginal and Torres Strait Islander and Maori patients and their families/communities/whanau in a culturally safe and appropriate manner. (Comm)<br>• Challenge individual and systemic forms of discrimination within the ED and health care service. (HA)<br>• Support sustained relationship with external organisations to improve the delivery of health care to patients of all ethnic and cultural backgrounds including Aboriginal and Torres Strait Islander Peoples, Maori, refugee, asylum seeker and otherwise vulnerable patients. (HA) |

## TS4 Non-ED – 1: Leadership and Management

FACEM Curriculum Graduate Outcomes:

Leadership and Management

- Provide clinical supervision, management and leadership and actively foster a culture of patient safety.

Teamwork and Collaboration

- Effectively manage and participate in an interprofessional team, particularly at times of high stress and medical emergency.

Health Advocacy

- Protect and advance the health and well-being of any individual patients, communities and populations.

Professionalism

- Practice ethically and adhere to medicolegal requirements, adopt and role model sound wellbeing practices, and actively commit to and promote the maintenance of professional standards.

TS4 Learning Outcomes:

### Leadership and Management

- Apply modified risk stratification and prioritisation processes. (P&DM)
- Lead a team debrief. (T&C)
- Recognise the need for additional resources to aid in debriefing. (T&C)
- Demonstrate continued situational awareness with increased task loading. (P&DM)
- Encourage doctors to care for self and others. (PROF)
- Promote a zero tolerance for bullying and harassment (PROF)
- Communicate with team members to clarify and move forward from complex ethical dilemmas arising from conflicting professionalism and clinical judgements. (PROF)
- Create responses to media enquiries with the aid of standard organisation communication processes. (L&M)
- Clearly communicate with external agencies involved in public health responses, including police, local health department and other relevant agencies. (L&M)
- Advocate for the provision of appropriate resources for vulnerable patients in the ED, hospital and community. (L&M)
- Advocate for and support the provision of appropriate resources for Indigenous patients in the ED, hospital and community. (L&M)
- Support sustained relationship with external organisations to improve the delivery of health care to Indigenous patients. (L&M)
- Make recommendations based on results obtained for key performance indicators. (L&M)
- Outline the cost of health care to both the consumer and the hospital. (L&M)
- Add elements of a business case when drafting a proposal for change. (L&M)
- Advocate systematically for improved access to health care and the elimination of inequities for patients. (L&M)
- Respond actively to common public health initiatives that impact on emergency medicine, including pandemics and novel infectious diseases. (L&M)

### Complaints

- Handle patient complaints effectively, in a timely manner, with empathy and compassion. (L&M)
- Apply principles of complaint management to responses to complaints in a timely manner, including the compilation of case reports in response to an investigation into patient care. (L&M)

## TS4 Non-ED – 2: Teaching

**FACEM Curriculum Graduate Outcomes:**

Scholarship and Teaching

- Make sound judgements regarding the creation, translation, application and dissemination of medical knowledge.
- Commit to independent advancement and maintenance of own professional skills and knowledge, as well as contributing to the teaching of others.

**TS4 Learning Outcomes:**

**Supervision of Team Members (including junior clinicians and other members of the health care team but excluding medical students)**

- Confirm and enhance admission plans created by more junior team members (where relevant to placement). (ME)
- Provide skills, advice and resources to junior team members in order to overcome communication barriers and minimise risk to patient care. (Comm)
- Review the decisions of others to seek and address situations where either no decision or an incorrect decision has been made. (P&DM, ED only)
- Support team members in routine team leader roles. (T&C)
- Proactively assist team members in the assessment and management of their patients. (L&M)
- Facilitate the resolution of conflict involving staff members in the workplace. (L&M)
- Apply understanding of different types of clinical supervision to the oversight of the work of team members. (L&M)
- Role model appropriate leadership behaviours to team members including ongoing self-reflection, active advocacy against all forms of discrimination and racism, provision of culturally safe care. (L&M)
- Deliver constructive feedback to team members and peers. (S&T)
- Identify and implement strategies to assist junior staff in dealing with challenging workplace situations. (PROF)
- Monitor professional competence and currency of team members. (PROF)
- Promote values of work-life balance to mentees and team members. (PROF)

**Teaching (as relevant for placement)**

- Proactively utilise identified teaching opportunities. (S&T)
- Lead a case presentation and follow-up discussion with fellow clinicians. (S&T)
- Effectively teach procedural skills and the use of equipment. (S&T)
- Integrate simulation aids when delivering teaching as appropriate. (S&T)
- Teach culturally safe care. (S&T)

| TS4 Non-ED - 3 Quality Management |
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FACEM Curriculum Graduate Outcomes:

Leadership and Management

- Participate in quality improvement activities to create a departmental administrative framework to support safe clinical practice.

TS4 Learning Outcomes:

- Apply risk stratification and patient safety principles to the daily clinical operations. (L&M)
- Design clinical audits to measure the impact of ethnicity, gender and age on equity of access to care and health outcomes. (L&M)
- Make recommendations based on an audit analysis. (L&M)
- Manage the process of a departmental morbidity and mortality meeting and its application in the quality cycle (where relevant to placement). (L&M)
- Contribute to the implementation of system changes to improve patient care as a result of an investigation into sentinel patient care event. (L&M)
- Lead a team to collect data for quality assurance, clinical audit and other risk management activities. (L&M)
- Collate, analyse, and present audit data to peers. (L&M)
- Ensure lessons learnt from management of complaints are discussed at team meetings, followed by written reports highlighting concerns and advice to all staff to avoid recurrence of similar incidents. (L&M)

## 22    Accreditation requirements relevant to non-ed special skills placements accredited for TS4

There are three requirements for TS4 Non -ED accreditation beyond what is required for other stages (details are provided in the table below):

1. Leadership and Management: Trainees undertake senior leadership roles (at registrar level or above).
2. Teaching: Trainees supervise and teach junior clinicians[1] on the floor (appropriate numbers where relevant to placement); formal sessions in protected teaching time; other members of the health care team.
3. Quality: Trainees participate in and lead QI and QA activities.

| Domain TS4 Non-ED 1:    Opportunities for Leadership and Management Skills |
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| **Standard TS4 Non-ED 1.1:**        Governance, Leadership and Management |
| Criterion TS4 Non-ED 1.1.1    The training site rostering provides opportunities for clinical leadership |

Requirement TS4 Non-ED 1.1.1.1

Trainees undertake senior leadership roles (at registrar level or above)

The intent of this accreditation requirement is to ensure TS4 trainees gain experience in leadership and supervision within a Fellow supported or supervised environment.

In clinical roles:

- the leadership and supervision role will involve facilitating and coordinating effective and efficient multi-disciplinary patient care; in particular, through direct and indirect patient management, patient flow and supervision of junior medical staff.

- exposure is also required to be representative of all clinical teams / areas of the department, especially in teams / areas with greater leadership and management opportunities within a Fellow supported or supervised environment.

- TS4 trainee night shifts are excluded from fulfilling this requirement unless the site can demonstrate on-site Fellows are clinically present to provide a supported or supervised environment.

Suggested strategies (clinical roles):

- Allow TS4 trainees to perform ward rounds as if they were a senior registrar in that clinical discipline

- Allow TS4 trainees to manage consults from hospital teams (ED or inpatient teams) about admitted patients

- Allow TS4 trainees to manage telephone referrals from outside the hospital (e.g. GP telephone referrals, or referrals from patient residences)

    *Trainee participation in the on-call roster may be a valuable experience in TS4 but such participation should be **optional and only undertaken by mutual agreement between a trainee and the site**. A trainee electing to participate in the on-call roster should be do so only as the first on-call supported by a consultant as the second on-call. **Sites must provide a documented escalation strategy to show that trainees are appropriately prepared and supported.**

Suggested strategies (non-clinical roles):

- Allows TS4 trainees to lead a small group to implement a small project related to a process for ED patient care

Examples of evidence:

- Details of leadership opportunities

- Trainee roster with highlighted team/area lead shifts

- Trainee logbooks and ITAs including summary of small project implemented during the SSP

- Feedback from internal or College surveys that demonstrates that the site is meeting this requirement

## Domain TS4 Non-ED 2:    Opportunities for Teaching

### Standard TS4 Non-ED 2.1:        Scholarship and Teaching

| Criterion TS4 Non-ED 2.1.1 | The training site provides opportunities for TS4 trainees to teach junior clinicians (includes JMOs, interns, junior registrars, Associateship trainees, TS1-2 trainees but excludes medical students) and other members of the health care team as relevant to discipline. |
| --- | --- |

Requirement TS4 Non-ED 2.1.1.1

Trainees deliver some formal education sessions and have the responsibility to supervise and teach:
- junior clinicians on the floor (appropriate numbers where relevant to placement)
- other members of the health care team
- formal sessions in protected teaching time

The intent of this accreditation requirement is to ensure TS4 trainees are provided a consultant supported environment to deliver formal education, which is an assessable requirement of the FACEM training program.

Involvement may be within any aspect of the site's structured education program (e.g. primary or Fellowship education sessions, simulation, EMET program, junior clinicians education session, nursing education sessions etc).

Suggested strategies:

- The site rosters TS4 trainees to the teaching roster, EMET training, sessions in protected teaching time, simulation sessions, intern and resident teaching, grand rounds and other education in hospital across disciplines, Primary examination teaching, and nursing in-service.

- The TS4 trainee receives a debriefing session post the delivery of the education session.

- For Ultrasound SSPs, this may mean observing other trainees perform bedside ultrasound teaching and then providing feedback on their skills.

- For Medical Education/Simulation SSPs, this may mean observing other trainees providing bedside teaching and then providing feedback to that trainee on their teaching skills.

- For Medical Administration/Safety & Quality, this may mean observing other trainees deescalating patient complaints in the ED, or coaching trainees as they input data regarding a patient error into the ED quality monitoring system.

- The preparation and delivery of the education session occurs with the support of a Fellow.

Examples of evidence:

- Education rosters indicating the TS4 trainee involvement

- Minimum number of in-charge day/evening shifts per week/rotation, SIM lead.

- Feedback from internal surveys that demonstrates the site is meeting requirements.

- Completion of the observed teaching assessment tool as part of the FACEM training program.

## Domain TS4 Non-ED 3: Opportunities for Quality Improvement Activities

### Standard TS4 Non-ED 3.1: Quality Management

### Criterion TS4 Non-ED 3.1.1 Trainees are involved in quality improvement activities

Requirement TS4 Non-ED 3.1.1.1

Trainees actively participate in Quality Improvement (QI) and Quality Assurance (QA) activities with opportunities to lead (with consultant support).

The intent of this accreditation requirement is to ensure TS4 trainee's involvement is beyond purely attending QI and QA activities.

Suggested strategies:

- A consultant supported environment provides an opportunity for TS4 trainees to lead certain activities

- Where applicable, TS4 trainees are actively involved with the preparation and delivery of Morbidity & Mortality meetings

- TS4 trainee completes an audit

- TS4 trainees are actively involved in guideline development

- TS4 trainees are actively involved in departmental or hospital quality focus groups

- TS4 trainees are actively involved with, rostering

- TS4 trainees are involved in stakeholder communication.

Examples of evidence:

- Roster / minutes of QI and QA meetings demonstrating TS4 trainee involvement

- Examples of activities / projects completed by TS4 trainees

- CST time allocated to the TS4 trainees for QI and QA activities.

- Completed assessment tool required for FACEM training program.