



# Guidance for the completion of the Management Portfolio component of the EM curriculum

March 2019

## Management Portfolio

The management portfolio is part of the workplace-based assessment (WPBA) schedule for higher training and should be completed within the ST3-ST6 years. This guidance will also be useful for specialty doctors gathering evidence for a CESR application.

Trainees are required to complete a **minimum of four assignments**.

Two mandatory assignments are required:

- 1) Managing a complaint and
- 2) Managing a critical incident

Furthermore, at least one of the four assignments must include working with other specialties as part of the assignment.

A list of other Management Portfolio topics and examples of benchmarking criteria for the two mandatory assignments are provided below as annexes for reference. Trainees and trainers are encouraged to use benchmarking to ensure that the four assignments are at the standard expected of a newly appointed consultant.

Trainees may need to complete more than 4 assignments. There is a recognition that some e.g. managing a critical incident can be a challenging assessment. Trainees are strongly encouraged to undertake initial assignments as a formative exercise, as there are likely to be some elements that do not meet CCT requirements, before submitting a portfolio entry as a summative assignment.

Trainees are required to complete three aspects to each portfolio assignment:

- A record of each assignment
- A reflection recorded on a management record
- A successful summative WPBA with an RCEM trainer.

## Relationship to ARCP

Management assignments are undertaken from ST3-6 in EM and PEM posts only.

A management assignment should only be undertaken when working in a substantive post in an emergency department either in training or outside of training i.e. not when on long-term absence from work.

Each trainee will be expected to have completed at least one management assignment by the end of each training year and all assignments should be at the standard expected at the end of training, i.e. readiness for consultant work in this task.

This will be reviewed at ARCP panel. Failure to present documented evidence of a management assignment to the appropriate standard will result in an outcome 5, or an outcome 2 if the assignment has not been completed (meaning the trainee must complete two assignments the following year).

In ST3, non-completion of a management assignment or completion, but not reaching the required benchmark, would still lead to an Outcome 1. Completion of both the ST3 assignment and ST4 assignments to the required standards must then be demonstrated at ST4 ARCP.

If the trainee has completed their four management assignments in the first year or two (ST3 and above) this should be noted on the trainee's portfolio and no further management assignments are mandated, provided they are all at the level of 'newly appointed consultant'.

## Benchmarking Management Assignments

Assignments are not meant to be onerous. Some require a specific minimum time period but on average one will take a month to complete.

**From August 2018**, at the end of the assignment the trainee should meet the learning objectives for each project. These will be demonstrated by:

1. A record of the assignment:

Documentation/detail of the management assignment and the trainee's role in this will be recorded. Given the sensitive nature of many of the assignments, uploading them to the e-portfolio is not always appropriate. To replace this, a short record of the output should be used for each assignment, signed by trainee and trainer once they have read the full output for each project. The form for this is below. It is important that trainees anonymise any information that could identify a patient or any individual working in the hospital or the department.

2. A reflection:

A brief summary of their learning from undertaking the work will be recorded. This should be completed on the management assignment record form. Trainees are advised to review the domains of the WPBA before writing the reflection. Guidance is available in the [AoMRC and COPMeD Reflective Practice Toolkit](#).

3. A Successful WPBA:

Meeting with an RCEM trainer, a summative evaluation and discussion of the assignment will be completed. The full assignment output and trainee's reflection must be reviewed. Appropriate summative WPBA form must be completed for the assignment. These are available under the 'Forms' section of the portfolio.

Trainers should refer to the relevant benchmarking criteria for each project to decide on whether the trainee meets the appropriate standard (examples below). If the WPBA is unsuccessful further learning, reflection and another WPBA can occur for the same project. **For the two mandatory assignments there should be no concerns in any domain.**

4. Record and Reflection will be uploaded into the trainee's library and linked to the curriculum.

Both the record of assignment and the project reflection should be uploaded into a clearly marked folder on the trainee's e-portfolio.

## Management and QIP

A trainee's Quality Improvement Project, or any part of a trainee's Quality Improvement Project, CANNOT be used as one of the management portfolio assignments.

### FAQ

BENCHMARKING - Please use the benchmarking criteria which are on the RCEM website.

[https://www.rcem.ac.uk/RCEM/Exams\\_Training/UK\\_Trainees/Management\\_Portfolio/RCEM/Exams\\_Training/UK\\_Trainees/Management\\_Portfolio.aspx?hkey=ffd77dcf-f7d2-43cd-bd33-db2f8e269a83](https://www.rcem.ac.uk/RCEM/Exams_Training/UK_Trainees/Management_Portfolio/RCEM/Exams_Training/UK_Trainees/Management_Portfolio.aspx?hkey=ffd77dcf-f7d2-43cd-bd33-db2f8e269a83)

The benchmarking criteria will help you (and your trainer) know what the project should cover and the standard expected. These should guide the WPBA discussion. A good portfolio would have reference to the project meeting, the benchmarking criteria on the WPBA or uploaded a completed benchmarking sheet to the project folder.

ORGANISING A TRAINING DAY – this project was omitted from the original portfolio advice but was a WPBA on e-portfolio. It is now included in the updated list of topics.

THEORETICAL PROJECTS - Management projects cannot be done theoretically the trainee must complete a piece of original work themselves, with supervision.

CRITICAL INCIDENT - The critical incident project can be done on **any** critical incident that can be investigated using root cause analysis. Often low/no harm incidents are better as this allows the trainee to work through in their own time. The objective is to learning the process not running a 3 month trust investigation.

COURSES – the management course benchmarking sheet can also be utilised to benchmark any of the management training domain projects (leadership, equality and diversity or other relevant).

## **Management Assignment Record**

**Project Title**

**Project Scope and Clinical Relevance**

**Timeline**

**Resources**

**Short summary of assignment**

**Management Assignment Reflection**

**Project Title**

**Summary**

**I declare that this project has been my own work, with appropriate support from trainers**

\_\_\_\_\_ **trainee**                      \_\_\_\_\_ **date**

**I agree that I have reviewed output from the project described above and used it to complete the appropriate WPBA using the benchmark criteria for end of ST6.**

\_\_\_\_\_ **trainer**                      \_\_\_\_\_ **date**

## Management Portfolio Checklist

Domain	type of project	Details	Date of completion
<b>Human resources/people management</b>	Rota management		
	Recruitment including interview		
	Appraisal		
<b>Financial</b>	Write a business case		
	Contribute to a cost improvement plan		
	PBR/management of information		
<b>Project management</b>	Introduce a guideline		
	Introduce a new piece of equipment		
	Develop a new service		
<b>Medicolegal</b>	Manage a complaint	<b>Mandatory</b>	
	Write a report for the coroner or solicitor		
<b>Confidentiality and data protection</b>	Teach trainees about data protection		
	Review a guideline		
<b>Risk management</b>	Manage a critical incident (An incident involving harm or a near miss to a patient which requires analysis of the event, getting statements, synthesising evidence and root cause analysis).	<b>Mandatory</b>	
	Draw up/review the departmental risk register		
	Evidence of attendance and contribution to clinical governance meetings over a period of 6 months		
	Produce/review a procedure to reduce risk ie x-ray results audit		
	Introduction and implementation of induction programme		
<b>Management training</b>	Evidence of attendance at management courses with reflective notes		
	Leadership courses attended with reflective notes		
	Equality and diversity training		
	Other relevant training courses		
<b>Education</b>	Organising a training day		

## Complaint WPBA Benchmark Sheet

	Concerns	Good practice	Trainer Comments
<b>Identify Staff involved, commission statements</b>	Inadequately utilises appropriate resources, sources of support or takes statements inappropriately	Good use of notes, timelines, staff statements or interviews if appropriate. Involves other resources; specialist, local and national guidelines, seeks senior support appropriately	
<b>Draft response covering all points</b>	Does not answer key points raised by complainant, or answers areas more appropriate for other staff groups	Answers all points raised specific to EM and gains input from other specialities as required.	
<b>Appropriately apologetic</b>	Unaware or unclear about when to apologise or when to defend complaint. Full of mistakes/grammar problems	Answers salient points effectively using appropriate language	
<b>Action Plan for complaint</b>	Has not identified actions or identified but not actioned appropriately. Poor feedback methods.	Identifies key issues. Identifies staff learning. DATIX Feedback to staff appropriately. Understands need to involve trainers and reflection.	
<b>Keeps time frame</b>	Unaware of complaint time frames, doesn't complete response in timely fashion	Timely investigation and response.	
<b>Understanding Complaints Process</b>	No knowledge or understanding process	Able to clearly describe process, stakeholders, timelines and outcomes. Involves supervisors, DME.	
<b>Complaint analysis</b>	Inadequately identifies key issues or the root cause	Demonstrates awareness of all salient points. Analyses the episode effectively and shows an awareness of lessons to be learned for the ED where appropriate	
<b>Reflection</b>	Has not thought through or demonstrated required learning from process. Not thought about impact on staff.	Demonstrates understanding of challenges within complaints process and identified learning points. Aware impact of complaints on staff. Sources support.	

*The assessor is asked to consider the learner's performance in all of the domains listed in completing this statement:*

**“Based on this WPBA, I would be satisfied that this learner could take on managing a complaint as a newly appointed consultant”**

Yes	
No	
Signature	
GMC	
Date	

**If no, these are the reasons and my recommendations for further work:**

## Critical Incident WPBA Benchmark Sheet

	Concerns	Good practice	Trainer Comments
<b>Analyses patient attendance</b>	Inadequately utilises appropriate resources to get clear picture of events.	Good use of resources; notes, timelines and other factors like attendances, staffing.	
<b>Identifies key points</b>	Does not recognise key points raised by critical incident, superficial investigation.	Identifies key issues. Involves other resources; specialist, local and national guidelines, seeks senior support appropriately.	
<b>Commissions appropriate statements</b>	Does not identify need for statements. Unsupportive of staff involved.	Identifies and commissions staff statements or interviews if appropriate. Sensitive and supportive. Involves appropriate senior for other staff groups	
<b>Synthesises evidence</b>	Uses limited evidence, doesn't think about wider picture.	Establishes timeline of key events using all resources available	
<b>Analyses incident through root cause analysis</b>	Does not demonstrate understanding of root cause analysis. Inadequate or superficial. Has missed key points.	Able to clearly describe process, stakeholders, timelines and outcomes. Analyses the episode effectively and identifies root cause.	
<b>Writes clear report</b>	Inadequate report, not done in timely fashion. Full of mistakes/grammatical errors. Unclear.	Clear and comprehensive reports with appropriate understanding of the incident. Timely. Identified all salient points.	
<b>Makes recommendations</b>	Inadequate recommendations	Identifies lessons to be learned for the ED and staff. Compares practice with appropriate benchmark.	
<b>Ensures recommendations enacted</b>	Recommendations not disseminated, or not allocated appropriately.	Feedback to staff appropriately. Understands need to involve trainers and reflection. Identifies key stakeholders for actions with appropriate timelines.	
<b>Reviews in 3 months</b>	No evidence of review	Has reviewed recommendations and updated report.	
<b>Reflection</b>	Has not thought through process or demonstrated required learning from process	Demonstrates understanding of challenges within SUI process and identified personal learning points. Aware impact on staff and patient. Sources support.	

*The assessor is asked to consider the learner's performance in all of the domains listed in completing this statement:*

**“Based on this WPBA, I would be satisfied that this learner could take on managing a critical incident as a newly appointed consultant”**

Yes	
No	
Signature	
GMC	
Date	

**If no, these are the reasons and my recommendations for further work:**