

SAM Trainee Report Spring 2017

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SAMCardiff

Our spring conference this year heads to Cardiff. Ex SAM trainee representative and new acute medicine consultant Nerys Conway will be hosting us on May 4th and 5th 2017 at a conference entitled 'Together Stronger.' Along with our regular favourites like Cases that changed my practice, we have an exciting trainee session organised including reflections from a past attendee at the EFIM winter school, an update on the Chief Registrars' program and insight into choosing Neurology as your specialist skill. Of note, we are holding an extraordinary AGM with proposed changes to the constitution during the conference and we will also be outlining our Vision, Governance and Strategy. Please do try and make it to the AGM as your voices are important.

Our role in leadership

The NHS is currently facing unprecedented challenges from increasing demands of the workforce within limited resources. SAM president Mark Holland has previously described our current working conditions as an "Eternal NHS winter". As future leaders, Acute Medicine trainees are ideally placed to play the quintessential role of doctors as leaders in ameliorating working environments and thereby affecting positively on patient and staff experience. We are seeing increasing representation of Acute Medicine trainees in influential leadership positions. This year, three AIM trainees were successfully appointed to the prestigious National Clinical Director's Fellowship program and we have excellent representation on Future Hospital Chief Registrar scheme. Neil and I sat in on a meeting recently where there was definite enthusiasm for the results achieved in the first year of the Chief Registrar scheme. They are looking to role the program out into its second year. If you are interested, come and listen to Zoe Jones talk about her experiences at the trainee session at SAMCardiff and lobby your trust to contact the Future Hospital team to participate.

TakeAIM

We hope by now all of you have heard of the takeAIM initiative. It was set up in 2015, sponsored by Health Education England. Six fellows successfully boosted the profile of Acute Medicine, organising 3 national conferences and a number of regional takeAIM sessions. Recognising the clear value-

add of the fellows, the Society of Acute Medicine is looking to continue supporting the program. Successful applicants will commence their post from SAMCardiff.

SAMBA 2017

SAMBA 2017 is only a few months away. The first annual benchmarking report was released in September. The initial audit in 2012 had 30 participating units, swelling to 94 participating units in 2016. The report gives us a very useful snapshot of the performance of acute medical units in 2016. Make sure you unit registers for the 2017 cohort. The data being collected is very useful in shaping the future of our speciality and we need your help in doing so.

SCE 2016 feedback

Specific concerns from feedback were put to the exam board. This included the relevance of the exam to everyday practice, the use of images which cannot be manipulated (eg inverting or using zoom functions) and feedback from the exams.

This was discussed at the SCE SGM in January and we were provided with the following:

Relevance of content of examinations to everyday practice

The board feel that the exam designed to test key areas of the speciality training curriculum and feels that work based assessments are better at assessing everyday practice.

Use of Images which cannot be manipulated (eg inverting or using zoom functions)

The board replied that all of the information necessary to answer the question is in the image provided and the stem; they deliberately do not include questions that require images to be manipulated.

Feedback from the exams

Both the SAC and the exam board encourage all trainees to discuss their results with their educational supervisors. There are trainees who have come to the end of their training without passing the SCE. This is a mandatory part of the curriculum. If you do find yourself in this position, please discuss this early with your educational supervisor. MRCP(UK) is also investigating methods of providing more detailed feedback to candidates.

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New Internal Medicine Curriculum and the Evaluation of new assessment system

The shape of training review proposed encourages generalism in the early stages of training to try and meet the needs of changing patient demographics in hospitals. This has resulted in the development of a new Internal Medicine Curriculum by the JRCPTB in conjunction with MRCP (UK). Alongside the new internal medicine curriculum, AIM trainee and RCP Education Fellow Shuaib Quraishi has been helping develop a new assessment system. While the current system is based on achieving a large number of individual competencies, a streamlined one would focus on a smaller number of outcomes, known

as Competencies in Practice (CiPs), which reflect the key professional activities of a fully trained physician. They have recently completed a proof of concept study to explore the feasibility and acceptability of using this model in an NHS setting. A total of 78 trainers and trainees provided feedback for the study. Further details can be found at

<https://www.jrcptb.org.uk/training-certification/shape-training-and-new-internal-medicine-curriculum/cip-proof-concept-study>

Shuaib has kindly agreed to come to our next SAMconference in Birmingham in September to discuss the findings of the study and elaborate the impact this will have on future trainees.

We look forward to seeing you at Cardiff!