**Acute Care Assessment Tool (ACAT) 2020**

The internal medicine stage 1 curriculum has a critical decision point at the end of year 2 (IMY2) that determines whether the trainee has the necessary capability to lead the acute take with indirect supervision. The ACAT 2020 includes feedback on elements that are critical to running the acute take which will help the educational supervisor in making a judgement on the level of supervision required for CiP 1.

Descriptors relating to CiP 1 are included in the ACAT 2020 to prompt the assessor about the elements that they should review and comment on. If any aspect of the assessment cannot be covered then it is important that the assessor states that they are unable to comment. The trainee should have seen at least five patients to make the assessment valid. The trainee should discuss with their educational supervisor the number of ACAT 2020 supervised learning events required to demonstrate capability. It is unlikely that a single ACAT could provide sufficient evidence but the assessment of overall progress by the educational supervisor will also take into account the multiple consultant reports as part an holistic assessment of the trainees capabilities.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Trainee’s name:** |  | | | | **Trainee’s GMC** | |  | |
| **Trainee’s training programme** |  | | | | **Trainee’s post/grade** | |  | |
| **Assessor:** |  | | | | **Date of assessment** | |  | |
| **Are you completing this assessment as a consultant?** | **Y/N** | | | |  | |  | |
| **How has the trainee’s work been assessed?**  e.g. direct observation during acute work, PTWR, ward round in down-stream unit | | | | | | | | |
| **Short summary of patients seen** (at least 5 patients for a valid ACAT) | | | | | | | | |
| **Which aspects were done well?**  **Please comment on the following areas as appropriate in the box below:**  **Managing an acute unselected take**   * Demonstrates professional behaviour with regard to patients, carers, colleagues and others * Delivers patient centred care including shared decision making * Takes a relevant patient history including patient symptoms, concerns, priorities and preferences * Performs accurate clinical examinations * Shows appropriate clinical reasoning by analysing physical and psychological findings * Formulates an appropriate differential diagnosis * Formulates an appropriate diagnostic and management plan, taking into account patient preferences, and the urgency required * Explains clinical reasoning behind diagnostic and clinical management decisions to patients/carers/guardians and other colleagues * Appropriately selects, manages and interprets investigations * Recognises need to liaise with specialty services and refers where appropriate   **Delivering effective resuscitation and managing the acutely deteriorating patient**   * Demonstrates prompt assessment of the acutely deteriorating patient, including those who are shocked or unconscious * Demonstrates the professional requirements and legal processes associated with consent for resuscitation * Participates effectively in decision making with regard to resuscitation decisions, including decisions not to attempt CPR, and involves patients and their families * Demonstrates competence in carrying out resuscitation | | | | | | | | |
|  | | | | | | | | |
| **Suggested areas for development**  **Please comment on the following areas as appropriate in the box below:**   * To understand the management of the breadth of acute illness * To manage the acutely ill patient * Be able to assess a patient in a defined time-frame * To propose an investigation and management plan in the acute medical situation * To review and amend existing investigation plans * To document clearly in the medical record * To communicate with the patient and where necessary relatives and other health care professionals * To provide leadership to the acute take medical team * To improve management of clinical handover | | | | | | | | |
|  | | | | | | | | |
| Please TICK (✓) to indicate the standard of the trainee’s performance in each area | | Unable to comment | | Below expectations for year of training | | Meets expectations for year of training | | Above expectation for year of training |
| Clinical assessment | |  | |  | |  | |  |
| Clarity of medical record keeping | |  | |  | |  | |  |
| Justifiable use of investigations and referrals | |  | |  | |  | |  |
| Management of critically ill patient | |  | |  | |  | |  |
| Time management | |  | |  | |  | |  |
| Management of take or ward round / Team working | |  | |  | |  | |  |
| Clinical leadership | |  | |  | |  | |  |
| Handover | |  | |  | |  | |  |
| **Overall CLINICAL JUDGEMENT** | |  | |  | |  | |  |
| Trainee’s comments | | | | | | | | |
| Trainee name & signature: | | | Assessor name & signature | | | | | |

January 2021