



College of Emergency Medicine

FELLOWSHIP EXAMINATION OF THE COLLEGE OF EMERGENCY MEDICINE

REGULATIONS AND GUIDANCE NOTES EFFECTIVE FROM SPRING 2014

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Main changes to regulations for Spring 2014

These regulations contain significant changes to:

- The application form must be signed by the Head of School or nominated deputy.
- The CTR section of the application form must be signed by a Consultant who has seen the CTR proposal, advised on the CTR preparation and who *has read the submitted document*. This may be not be the Head of School or nominated deputy who signs the main form.
- **Eligibility** - The candidate must have completed 2 years of the training programme in Emergency Medicine, as an ST4/5 or equivalent in Ireland training programme. **This must be 2 years' experience of Emergency Medicine. This does not include PEM or PHEM time.**
- **Resits** –candidates who have exceeded the 5 permitted attempts (within 3 years) are now exempt from resitting the CTR and Critical Appraisal providing they have already passed them. Candidates must therefore sit the OSCE, SAQ and Management papers only. They will be required to submit evidence that they have completed a formal preparation programme in accordance with the College template.
- The Critical Appraisal may be sat after satisfactory completion of CT2 ARCP or by trainees enrolled in a programme at CT3 level. Non-trainee regulations for Critical Appraisal remain the same. Trainees who have been awarded a postgraduate academic degree (MD or PhD) may apply for exemption from the Critical Appraisal paper, by using the Critical Appraisal exemption request form, which is available on the College website.
- Candidates must submit their CTR in electronic format, by email, using ctr@collemergencymed.ac.uk the document must be in Word 2010 format. No other format will be accepted. Failure to submit the CTR in electronic format will result in rejection. Paper copies will not be accepted. The maximum size of the electronic submission is 1MB.

Introduction

The Fellowship Examination of the College of Emergency Medicine (FCEM) is intended to allow the candidate to demonstrate the necessary skills and competences required to be a successful Consultant in Emergency Medicine in the UK and Ireland.

These regulations relate to the diets from Spring 2014 (inclusive) onwards.

The regulations provide the formal framework whereby the examination will be conducted.

The regulations refer to appeals - but no appeal against the processes described herein is possible. By signing the application form, candidates are agreeing to abide by these regulations current at the time of the sitting.

Overview - Content

The examination assesses the candidate's performance in the range of skills and behaviours described in the College curriculum. The candidate must be able to work as an independent practitioner undertaking the leadership tasks needed in a modern ED in the UK and Ireland. These include critical appraisal of the medical literature, management skills and the ability to write a concise and well argued case for change on a clinical topic. This requires candidates to have a good knowledge of the changing nature of healthcare delivery in the UK and Ireland, and to demonstrate an awareness of multiprofessional team working.

The College believes that candidates who have not worked in the UK or Ireland Healthcare system are significantly disadvantaged in the fellowship examination and the College requires overseas candidates to undertake a two week period of observation in an ED in the UK or Ireland prior to the examination.

Candidates will also be expected to demonstrate

- Excellent written and verbal communication skills in English – this is likely to be to the level of IELTS6
- Non technical skills such as prioritisation, delegation, communication, situational awareness, decision making under pressure
- Knowledge of information resources relevant to emergency patient care both within and without the hospital setting.
- Knowledge of educational principles applicable to Emergency Medicine at both undergraduate and postgraduate levels.
- An understanding of research methodology, candidate should be able to assess the validity and clinical relevance of research work.

The examination is blueprinted to ensure the breadth of the curriculum (knowledge, skills, behaviours) is covered by the combination of all parts of the examination. It is therefore intended that the majority of the candidates will pass all sections at one diet.

Candidates are strongly recommended to read the curriculum on the College website and to structure their preparation according to the contents of the syllabus (list of competences) and workplace based assessment standards.

Format of the Examination

There are five sections of the examination. All must be passed in order to be awarded the Fellowship of the College by Examination.

Section A – Critical Appraisal short answer question paper (SAQ)

Part (i) Short Answer Question paper (SAQ) on a published paper

Duration - 90 minutes

Section B – Clinical Topic Review (CTR)

Part (ii) Clinical Topic Review (CTR)

The candidate will prepare a written dissertation of no more than 3,500 words on a given clinical topic. The CTR must be submitted with the examination application form.

Duration of the viva – 15 minutes

There are some circumstances when a candidate will be exempt from this part of the Academic Section – please see Section A (ii)

Section C - Management viva

Part I - In-tray exercise

The candidate will be given a number of documents simulating a Consultant's "in-tray" of management scenarios. The candidate has 5 minutes to read the material prior to the viva

Part ii – Long Case

The candidate is handed a single document describing a clinically related topic for discussion.

Duration – each part of this examination is 15 minutes with a total viva time of 30 minutes (with 5 minutes reading time).

Section D - Clinical short answer question paper (SAQ)

A paper of 20 questions requiring short answers.

Duration - 2 hours and 30 minutes

Section E - OSCE

Objective Structured Clinical Examination (OSCE)

12 stations each lasting 8 minutes and 2 stations lasting 17 minutes.

Duration - 2 hours 42 minutes

NB - Section D and Section E must be taken, and passed at the same sitting. Standard

Timing and sequence of the examination sections

Section A and Section D (the written papers) are held approximately 6 weeks before the vivas and OSCE.

All parts of the examination must be passed independently in order to achieve the Fellowship by Examination status.

Section A may be sat after a satisfactory ARCP for CT2 or after the equivalent of 2 years post foundation training, 6 months of which must be in Emergency Medicine and with evidence of completion of a suitable training programme in critical appraisal techniques.

On first application – all remaining sections of the examination must be sat. There is no opportunity for deferment of a single section.

Withdrawal from one section (without appropriate reason) will normally invalidate all other results on that diet and require the candidate to sit the whole examination again. This applies to all sections including the Clinical SAQ (Short Answer Question), OSCE and vivas.

Eligibility

1. Primary medical qualification

The candidate **must** hold a primary medical qualification that is acceptable to the United Kingdom General Medical Council for Full Registration or to the Irish Medical Council for Full or Temporary Registration.

2. Registration with the required authority

The candidate must also hold full current registration with the required authority. For the UK and Ireland, this will be the General Medical Council or Irish Medical Council. For overseas candidates this will be the Medical Council for the country where they work and reside.

3. Enrolment for training

UK trainees in EM Higher Training posts must have enrolled for training with the Training Standards Committee (TSC) of the College of Emergency Medicine and must have paid their training fee.

Trainees who have not enrolled for training or paid their fee are not eligible to apply for the examination

Please note: registration/training fee is separate from membership of the College. If you are unsure whether you have registered, or if you have a query about registration, please contact the College's Training Department.

Irish trainees must have enrolled with the Advisory Committee on Emergency Medicine training in Ireland (ACEMT) of the Royal College of Surgeons of Ireland.

4. Discussion and confirmation of preparedness

Trainees are expected to have discussed their preparation for the examination with their Educational Supervisor and with their Training Programme Director at their ST5 ARCP (or equivalent). Such a discussion will identify any learning required prior to the examination and ensure that the trainee understands the standard and format of the examination. The application form must be signed by the Head of School or nominate deputy who has discussed the examination and the candidates' preparation with them.

The CTR section of the application form must be signed by a Consultant who has seen and advised on the CTR preparation and who has read the submitted document. This may be different to the Head of School or nominated deputy who signs the main form.

Non trainees do not need to have enrolled or to be a member of the College to sit the examination. Non-trainees would typically be taking the examination as part of the application process to the General Medical Council (GMC) for specialist registration in Emergency Medicine under Article 14 of the General Medical Practice and Specialist Medical Evaluation Training and Qualification Order 2003.

Success in the FCEM examination will assist an application under Article 14 but will not guarantee a successful application. Applicants should read the guidance produced by PMETB and the College of Emergency Medicine to ensure that they meet all the criteria.

Non-trainees may also choose to sit the examination for personal or other reasons.

Non-trainees and doctors working or training overseas who wish to sit the examination are required to discuss the examination, in the first instance, with the Dean of the College or Director of Examinations. This will allow the Dean or Director of Examinations to explore the candidate's experience and understanding of the breadth and depth of the examination and the standard required. This will normally be by telephone.

They must also have their application form signed by a Consultant in their own country or department who confirms that they have completed the listed posts and that they are able to perform at a standard appropriate to an independent Consultant working in Emergency Medicine.

They must also have spent at least 2 weeks observing in an Emergency Department in the UK or Ireland – or be working in a similar health system. This will be discussed with the Dean or Director of Examinations

The CTR section of the form must be signed by a Consultant in Emergency Medicine who has read the CTR and the regulations and confirms that they believe it to be of a suitable standard.

5. Experience and evidence required for Section A- Critical Appraisal

- Trainees in their CT3 year or above may apply to take the Critical Appraisal paper from the Spring 2014 diet onwards. There is no requirement to submit an intention to sit form.
- The trainee must submit an appropriately completed ARCP form for their CT2 or CT3 year (as appropriate).
- Trainees must have completed a Critical Appraisal course or attended local relevant training days
- Trainees must have passed the MCEM.
- Failure in the Critical Appraisal paper will then require the trainee to undertake further training. Trainees are not restricted on the number of attempts of sitting the Critical Appraisal paper.
- The form must be signed by the Head of School or nominated deputy – the local Educational Supervisor is not sufficient.
- **Non Trainees:** Must have completed a UK critical appraisal course. Please state the title of the course, the date of the course and enclose a copy of the course certificate as evidence.

6. Experience and evidence required for the sections B-E (excluding Critical Appraisal)

Specialist Registrars or Specialty Trainees enrolled with the Training standards committee or ACEMT

- The candidate must have completed 2 years of the training programme in Emergency Medicine, as an ST4/5 or equivalent in Ireland training programme. **This must be 2 years' experience of Emergency Medicine.**
- Candidates must have a successful ARCP/RITA (Record of In Training Assessment) outcome for the previous year. If the date of the relevant RITA or ARCP is after the closing date or the last ARCP/RITA is not recent (but before the date of the SAQ), the College will accept a letter from the chair of the RITA or ARCP panel indicating that it is expected that the individual will have a successful assessment of progress. In the event of a delay in providing the documentation, the trainee's supervisor will be required to write a covering letter confirming the trainee has the competences to do the examination and the delay is outside the trainee's control.
- Trainees in Ireland must have similarly satisfied the ACEMT of progress to completion of training.
- Candidates must be working in Emergency Medicine (not an OOPE/R) (Out of Programme Training Experience/Research) at the time of application except for:
 - Trainees in PEM sub specialty training
 - Trainees in dual EM/ICM training programmes
- Working in HEMS or equivalent posts in pre-hospital will not normally count as EM unless a letter of support is written by an Emergency Medicine Supervisor confirming regular EM contact of at least 2 days per month in the Emergency Department.
- Part time trainees must have completed the equivalent of 2 years full time higher specialty training in Emergency Medicine.

Non trainees and Overseas Candidates

- The candidate must have been in active full time medical practice for a total of 8 years post qualification, of which at least 7 years must be above Foundation year one or the equivalent.
- The candidate must have worked in Emergency Medicine for at least four years, of which three was in a post above SHO (or equivalent) grade (e.g. Registrar, Staff Grade, Middle Grade, Clinical Fellow, Associate Specialist, Locum Consultant or overseas equivalent). Within this post the candidate must have held middle grade or senior responsibility i.e. resuscitation team leader, senior shift doctor accepting undifferentiated adult and paediatric patients in the Emergency Department.
- The candidate must have been working in Emergency Medicine for the six months prior to application and still be working in Emergency Medicine at the time of the examination (or pro-rata time if flexible).
- Evidence of completion of relevant posts must be provided. Evidence can be the signature of the Consultant Supervisor on the appropriate part of the application form or separate documentation on hospital headed note paper. Other evidence is acceptable at the discretion of the Dean of the College. The signatory must confirm each post was undertaken with appropriate clinical supervision, regular formal teaching, appraisal and feedback to the candidate. Each post must have a named signatory from that hospital, one Consultant cannot sign for posts in other countries/hospitals.
- There is no specific requirement to spend time in related acute specialties outside Emergency Medicine. However, time in Paediatric Emergency Medicine, Critical Care/Anaesthetics and Acute Medicine will be helpful particularly for candidates whose experience in these areas may be several years ago. This experience will replicate the ACCS core curriculum training.
- Non-trainees, and doctors working or training overseas who wish to sit the examination are required to discuss the examination, in the first instance, with the Dean of the College or Director of Examinations. This will allow the Dean or Director of Examinations to explore the candidate's experience and understanding of the breadth and depth of the examination and the standard required. This will normally be by telephone.

They must also have their application form signed by a Consultant in their own country or department who confirms that they have completed the listed posts and that they are able to perform at a standard appropriate to an independent Consultant working in Emergency Medicine.

- For UK applicants who are non-trainees we would recommend that the candidate speaks to the Chair of the local training committee or Head of School for Emergency Medicine. The Chair should then sign the application form to confirm that they think the candidate has prepared suitably for the examination and understands the standard expected.
- The decision of the College of Emergency Medicine in relation to the eligibility of non - trainees or overseas candidates will be final. The College reserves the right to refuse entry to candidates if the evidence presented indicated that the candidate has little chance of success.

It is the candidate's responsibility to determine whether they feel that they are eligible to apply for the examinations. The decision (in writing) from the College will not be given until the fully completed application form has been submitted and checked by the Examinations Officer. No advice on eligibility will be given over the telephone.

Locum post

Not normally accepted unless full time for 4 months with evidence of educational supervision.

Locums at less than full-time but in one department may be considered at the discretion of the Dean.

Unemployment

Candidates who have been unemployed for more than four months will **not** be permitted to enter the examination.

Maternity leave

Candidates who have been on maternity leave are eligible to sit the examination but the College believes that candidates who have been on maternity leave for more than 4 months are likely to be disadvantaged in their ability to prepare for the examination.

Application Process:

1. Intention to sit form and deposit

The College requires candidates to confirm their intention to sit at least nine months in advance of the closing date and to pay a non-returnable deposit.

No late submissions of the intention to sit form and deposit will be accepted. The intention to sit form and deposit will normally be acknowledged by email within two weeks of receipt. Failure to receive an acknowledgement should alert the applicant to a problem – the College cannot take responsibility for not receiving the intention to sit form.

2. Submission of application form

Only those who successfully submitted an intention to sit form and deposit will be permitted to submit an application form. Applicants need only pay the balance of the fee (minus the deposit paid) with the FCEM application.

Trainees who are not enrolled with the TSC or ACEMT will not be eligible to submit an intention to sit form. It is the candidate's responsibility to submit evidence of enrolment with the intention to sit form. This may be a letter confirming the CCT date or receipt of training fee.

For those candidates that are resitters the appropriate application form will be sent to them by the Examination Officer. Resitting candidates should not submit a first time application form – this will be rejected.

Candidates may only apply for the next available diet – no prospective applications **in addition** to the current application will be accepted. Intention to sit forms and deposits **must** be submitted for each diet.

3. Evidence needed

Applications will only be considered once all documentation is received, with the relevant fees; incomplete applications will be returned without consideration of eligibility.

Application closing dates

Application form(s) for entry to any part of the examination **must** be received by the College by the published closing date (**5.00pm**). Applications received after the closing date will be returned and not be considered for eligibility.

Application forms will be acknowledged within 3 weeks of receipt (wherever possible).

Candidates who do not receive an acknowledgement must assume that the application form has not been received.

The College will not take any responsibility for application forms that are not received/acknowledged.

Timeline for application and details

1 year – consider application for the examination – check eligibility. Submit intention to sit form and non-returnable deposit together with evidence of enrolment for training (trainees only).

4 months – check closing date and submit correctly completed application form(s), signed by Educational Supervisor/CTR Supervisor, electronic CTR and balance of fee.

3 weeks after closing date – College confirmed eligibility and place.

2 weeks (approximately) before SAQ examinations – College confirmation of candidate number, venue of examination, registration time and start time of examination. This will

include information for those who are eligible to sit the CTR viva – those who have successfully passed the CTR on the written and those whose written submission is not of sufficient standard to require a viva will be informed of these results at this stage.

3 weeks after last day of examination diet – results published on College website.

4 weeks after examination results published (wherever possible)– detailed feedback to candidates and trainers.

Confirmation of eligibility

The decision (in writing) from the College will not be given until the fully completed application form and the appropriate fee has been submitted and checked by the Examination Officer. **No advice on eligibility will be given over the telephone.**

Applicants **must** be eligible for the relevant part of the examination at the time of the examination sitting (not the time of application). This allows candidates to prospectively apply pending completion of the recommended experience. Failure to complete the anticipated experience will disqualify the candidate from the examination. Candidates are however reminded that failure to acquire the relevant experience and thus competencies will jeopardise their chance of success in the examination. Candidates should review the requirements for experience these regulations.

All correspondence from the College will be by email with a Royal Mail letter to follow where necessary. Candidates **must** provide a working email address and are responsible for updating the College if this changes. Failure to provide notice of change of address or email will not be considered as mitigating circumstances.

Number of attempts/Resits

Candidates must pass each part independently. Both sections D and E must be passed at the same sitting.

Once a candidate has passed the CTR and Critical Appraisal they will not be required to resit that section.

Failure of the Clinical Topic Review (CTR)

If the candidate fails the CTR, the candidate will need to submit a new written CTR and undergo a repeat viva. The resubmitted CTR can normally be on the same subject but is expected to be updated and areas of weakness that have been identified must be corrected. The Dean will give advice on what is required to individual candidates in the event of a failure in the CTR. If the written CTR is of very poor quality, the Dean may recommend that the candidate chooses a different topic and defers by one diet to give time to adequately prepare the CTR.

Repeated failure

Failure to complete the FCEM at five attempts in total including the first attempt (maximum six diets over 3 years inclusive) results in the requirement to resit the Management, Clinical SAQ and OSCE regardless of previous passes.

A re-assessment of his/her career aspirations is recommended. Any subsequent applications must be supported with letters from the Chair of the local Training Committee or Head of School confirming that they support the application and that they consider that it is in the candidate's and the specialty's best interest that he/she has a further attempt. In the case of a non-trainee or overseas candidate, the Dean or Director of Examinations will determine the suitability of the candidate in conjunction with their local Clinical Supervisor or Sponsor. There needs to be a detailed programme of training (see **Appendix 1**). The re-application must be made **AFTER** the period of additional training described and evidence must be submitted that the training was completed successfully. A named Supervisor must confirm the programme and its completion. It is therefore likely that any reapplication will be at least 1 year later than the last attempt.

If a candidate needs to resit more than one section of the examination they **must** apply for **all** of those sections when applying for the next/subsequent sitting.

Specific guidance on sections of the examination

Section A - Critical Appraisal - Short Answer Questions (SAQ) - Review of published work

Candidates will be given a total of **90 minutes to read the paper (without its abstract) and answer the accompanying short answer questions** which will be in the form of a paper. The answers must be clearly written in the space provided in the marksheets. Candidates are advised to prioritise possible answers as marks will be awarded for the first answers given only. Candidates will first be asked to summarise the paper typically in less than 200 words/one side of A4, describing the essential elements of the study. Subsequent questions will focus on the design, analysis, results and conclusions.

Duration: 1.5 hours

Exemptions

Trainees who have been awarded a postgraduate academic degree (MD or PhD) may apply for exemption from the Critical Appraisal paper. The trainee must submit the certificate of completion of the academic degree at application. Postgraduate degrees other than MD or PhD will NOT be considered. The CTR exemption request form is available on the College website.

Section B - Clinical Topic Review (CTR)

The assessment of the CTR is in two parts:

- i) the written CTR review – 60% of marks
- ii) the viva of the CTR – 40% of marks. This will be for 15 minutes.

Failure to score 7 in the written will mean an automatic fail. A mark of more than 21 in the written will mean an automatic pass and no viva will be required.

Candidates should note that excessive use of tables to reduce the total word count will not be accepted, it is recommended that no more than four tables should be used.

The search strategy should be included in the main body of the CTR.

Any CTR longer than 3,500 words (excluding tables, references and appendices relating to personal work) will not be considered.

The CTR should be:

- The sole work of the candidate.
- Typed using 12-font typeface with double spacing and 2 cm margins.
- Referenced throughout using the Vancouver style.
- Include a header at the top of each page containing the candidate's name, title of review and page number.
- The front sheet should include the title, the candidate's name and word count and a signed declaration that the manuscript is **all their own work and there has been no plagiarism.**

Candidates must submit their CTR in electronic format (by the published closing date), by email, using ctr@collemergencymed.ac.uk the document must be in Word 2010 format. No other format will be accepted. Failure to submit the CTR in electronic format will result in rejection. Paper copies will not be accepted. The maximum size of the electronic submission is 1MB.

Please also note the following important information:

- Each candidate must submit their Clinical Topic Review **at the same time as their application form** by the deadline stated for the examination for which they are applying.
- Candidates will not be permitted to submit an amended Clinical Topic Review after the examination closing date.
- The top 50% of those who have passed will be invited to submit their CTR for publication on the College's ENLIGHTENme Hub and the candidate will have a College ePublication. This will not compromise the author's ability to subsequently submit their work if they also wish to a peer reviewed journal.

Plagiarism

THIS IS THE ACT OF INCLUDING OR COPYING, WITHOUT ADEQUATE ACKNOWLEDGEMENT, THE WORK OF ANOTHER IN ONE'S WORK AS IF IT WERE ONE'S OWN. IT IS ACADEMICALLY FRAUDULENT AND NOT COMPATIBLE WITH THE COLLEGE'S CODE OF CONDUCT.

All work submitted for assessment by candidates is accepted on the understanding that it is their own unassisted effort. Candidates are expected to offer their own analysis and presentation of information gleaned from research. In so far as candidates rely on sources, they should indicate what these are according to the appropriate convention in their discipline.

The innocent misuse or citation of material without formal and proper acknowledgement can constitute plagiarism, without a deliberate intent to cheat. Work is plagiarised if it consists of close paraphrase or unacknowledged summary of a source, as well as word-for-word transcription. Plagiarism is a serious disciplinary offence. Any failure to adequately acknowledge or properly reference other sources in submitted work could lead to lower marks or to a mark of zero being returned, or to disciplinary action being taken.

Ref: <http://www.registry.ed.ac.uk/staff/Examinations/collegesandplagiarism.htm>

Suspected plagiarism will be explored at the viva by the examiners – and a decision made as to whether the relevant section is plagiarised. The Dean or Director of Examinations may then interview the candidate regarding the suspicions before determining the next step.

Candidate's who's written CTR is not of sufficient standard to require a Viva, will nevertheless be offered a Viva if there is suspicion of plagiarism.

Exemptions - CTR

Candidates who have successfully completed a postgraduate higher research degree by examination (e.g. PhD, MD) on a topic relevant to Emergency Medicine are considered to have already demonstrated the skills required for this part of the examination. The PhD or MD must have required a thesis of at least 5,000 words and a viva voce examination for its award. **An MSc or equivalent degree will not be accepted.**

Candidates who believe they may be eligible for exemption as a result of gaining these qualifications **BEFORE** the FCEM, should complete the CTR request form (available on the College website) at least six months in advance of the closing date of their intended sitting. They should submit relevant information regarding the course work, the thesis word count and regulations, and the details of any viva undertaken. Candidates also need to send a copy of the thesis abstract and a certified copy of the University documentation showing successful completion of the degree with the thesis title.

This will be considered by the Dean for eligibility and the candidate informed 3 months before the closing date of their exemption. Failure to submit evidence 6 months prior to the closing date will result in the candidate having to complete a CTR regardless of the previous qualification. The acceptance of a previous work as exemption is at the discretion of the Dean and his/her decision is final. Candidates who have been given exemption by these qualifications should complete the relevant part of the application form.

Section B – Management viva

35 minutes.

The candidate will be expected to have a good understanding of the management of the Emergency Department and also of general health service management in the UK and Ireland. In particular he or she must be able to discuss methods available to resolve day-to-day organisational problems and the wider aspects of service provision, planning and future strategy.

Candidates are advised that this section is particularly challenging for those who have not worked in the UK or Ireland health systems and we would recommend candidates seek exposure to such experience.

In-tray Exercise

Candidates are given a typical morning's in-tray containing letters, memos, circulars and email along with the day's timetable and department staffing. Candidates should spend the 5 minutes' preparation time to read through the in-tray papers, organise and prioritise them. The candidate is then expected to be able to indicate their anticipated actions in response to the papers and to discuss the likely outcomes. Candidates should note that there are additional marks allocated for prioritisation, lateral thinking and the candidate's general approach as well as the marks allocated for dealing with the individual topics or papers. Candidates are permitted to write on the management papers and will be provided with post-it notes to use to make notes.

Management Scenario

Following on from the in-tray will be a scenario which will be linked with at least one of the in-tray topics. The scenario will be discussed and themes developed by the examiners for 15 minutes.

Section D- Clinical - Short answer question paper (SAQ)

This is a short answer question examination (SAQ) with 20 questions.

Duration: 2.5 hours

Section E - Objective Structured Clinical Examination (OSCE)

This is comprised of 12 stations of 8 minutes each and 2 double stations of 17 minutes each (giving a total equivalent to 16 single stations). There is one minute between each station and two rest stations. The total time, including two rest stations, is therefore 162 minutes.

All parts of the examination will be conducted in English.

Final criteria to pass the FCEM

- To pass the examination, a candidate must pass each section independent of the other sections.
- To pass the clinical section the candidate needs to pass both OSCE and SAQ at the same sitting.

Withdrawal from examination

Notice of withdrawal from any part of the examination must be given in writing (letter, fax or email) to the appropriate Examinations Officer. Candidates will be asked to provide evidence for their reason for withdrawal.

Withdrawal after closing date

Refunds or transfer of fees will not be made for any part of the examination where candidates submit their withdrawal request after the published closing date unless there are circumstances deemed as exceptional which can be substantiated. This will normally be in the following circumstances:

- Personal Illness
- Personal Involvement in an accident
- Death of a close relative (parent, sibling, spouse or child; the candidate must prove their relationship to the relative if they do not share the same surname).

Other cases may be considered on their own merit and at the discretion of the Director of Examinations. Documentary evidence is required in all cases and must be submitted with the request for withdrawal.

Conduct of the examination

A senior member of the Examination Department staff at the College office will normally be present throughout the entire period of the examination. Candidates are strongly advised to contact either the Dean or the Administration staff present if they have problems of any kind.

Candidates must bring photographic proof of identity to the examination for **all** parts of the examination. Suitable proof of identity must be an official document, such as current passport or driving licence that includes the candidate's name, signature and photograph.

Improper conduct by examination candidates

In the case of improper conduct of an examination candidate as defined below, the College may refuse a candidate entry to the current or future examinations.

Improper conduct is defined as ¹:

Dishonestly obtaining or attempting to obtain entry to the examination by making false claims about eligibility for the examination or falsifying any aspects of the entry documentation.

Obtaining or seeking to obtain unfair advantage during an examination, or inciting other candidates to do the same. Examples of unfair advantage are:

- having on the person any material that would give advantage in an examination once the examination has commenced (this includes electronic communication devices),
- communicating or attempting to communicate with another candidate once the examination has commenced, including passing information about the contents of the FCEM examination to candidates on subsequent days of the same diet,
- refusing to follow the instructions given by examiners or examinations staff concerning the conduct of and procedure for the examination. For example, any candidate continuing to write (even one letter) after the bell at the end of a written examination will be immediately disqualified.

Removing or attempting to remove from the examination any confidential material relating to the conduct of the examination.

Obtaining or attempting to obtain confidential information concerning the examination from an examiner or examination official.

Passing confidential information on the content of the examination to a third party.

¹ This list is not exhaustive.

In accordance with its Standing Orders, in cases of serious misconduct not relating to the examination, the College may decide that a candidate should not be allowed to proceed further with the examination or, having passed the examination, may not be admitted to Membership.

In the event of suspected improper conduct, the Dean of the College must, in conjunction with the Examinations Manager instigate an enquiry. The results of this enquiry must be made available within 30 days of the examination and be reported to the Education & Examination Committee. In the case of serious misconduct, the College may decide to refer the case to the GMC.

Equal opportunities

The College of Emergency Medicine aims to make every effort to provide an environment for candidates that is free from discrimination. It is the policy of the College that no candidate receives less favourable treatment than another on the grounds of age, gender, sexual orientation, marital or parental status, race or ethnic origin, colour, creed or religion, disability, political belief or social class or other irrelevant distinction. The College aims to assess candidates on the basis of merit, competency and potential.

To achieve this, the College has implemented the following strategies:

- formal mechanisms for training examiners.

- improved equal opportunities awareness for departmental staff with regard to examinations practice and service.
- monitoring admissions and examination results in relation to changes in the candidate population profile.
- monitoring of:
 - modes of assessment
 - examiner behaviour
 - examiner population profile
- a review of results and appeals procedure.
- review of policies and practices for fairness and relevance.
- special arrangements policy for candidates with disabilities and/or other specific requirements.
- policy for consideration of candidates' exceptional circumstances.

The College is committed to inclusivity and promoting a diverse workforce within the specialty. Candidates are therefore required to complete an equal opportunities monitoring form. Personal details of candidates will be kept confidential in line with the Data Protection Act. The College monitors success of different groups as part of the examinations process Quality Assurance.

The College will not accept behaviour from staff, members, examiners or candidates, which constitutes sexual or racial harassment or that which results in unlawful discrimination on any grounds. The College adheres to the provision for the protection of the rights of the individual within the following legislation:

- The Sex Discrimination Act – 1976/1986
- *The Disability Discrimination Act – 1995*
- *Special Educational Needs and Disabilities Act 2001*
- *The Race Relations (Amendment) Act – 2000*
- *Data Protection Acts 1984 and 1998*

The College maintains the right to discriminate lawfully in the interests of the medical/dental profession and this policy encompasses any regulations applied by relevant statutory or regulatory bodies such as the General Medical Council and General Dental Council.

Appeals are not allowed against the decision to disqualify. In the event of disqualification the candidate's results are immediately invalidated.

Results

The results for **all** sections of the examination will **not** be released until after the last day of the diet. The examination results are published on the College website showing the candidate number and pass or fail which will be 3 weeks after last day of examination diet.

Requests for early release of critical appraisal results or results of single sections for resitting candidates will not be considered. Applicants who are appointed to Consultant posts pending the results of the examination are reminded that a substantive appointment requires GMC confirmation of specialist registration and therefore the delay with the results is unlikely to impact on the feasibility of such an appointment. Trainees are required to give 3 months notice, and therefore the delay in release of results will not materially affect the exit from training.

Post Examination feedback

Feedback will be limited to a list of areas in which the candidate performed poorly and will normally be available four weeks after the examination results (wherever possible) have been published.

The College will not under any circumstances release any additional information to candidates on their performance.

Grounds of appeal against the examination results

Candidates who wish to make representations with regard to the conduct of the College examinations must do so in writing within 30 days of the last day of that section of the examination on that diet.

Appeals will be considered if they allege misadministration, bias or impropriety whether in the conduct or in the determination of the result of the examination. Appeals disputing the academic judgment of the examiners **will not** be considered.

Appeals will not be considered until after the results of the examination are published.

The full examination appeal process is available on the College website:

<http://secure.collemergencymed.ac.uk/code/document.asp?ID=6097>

Provision of services for candidates with special needs

The following table indicates the special provisions available for candidates with special needs. Any candidate who wishes to have special provision made must indicate the requirements at the time of application. The responsibility for requesting special modifications rests with the candidate. Candidates must provide a report from a relevant professional outlining their specific needs or adjustments required. The candidate must confirm that their Trainer and/or Head of School of Emergency Medicine is aware of their special requirements and is supportive of their application for the examination.

Candidates should note that there is **no** provision for extra time in OSCEs.

In general, candidates who are **not working** at the time of the examination due to temporary ill-health are considered to be ineligible for the examination and will need to submit written medical evidence to the Dean that they are able to take the examination if they wish to sit.

Candidates who are on sick leave from their employment at the time of the examination will not ordinarily be permitted to sit the examination, as the College considers this to be an eligibility exclusion criterion.

Pregnancy – examination deferral

A deferral, with no financial penalty, may be permitted to a candidate supplying an appropriate medical report which satisfies the Dean indicating that:

- a) the candidate has any pregnancy related problems or illness and/or
- b) the candidate's confinement is due shortly before or around the date of the examination.

In such circumstances a deferral will be permitted and no further fee will be required including the deposit for intention to sit.

If a candidate will be pregnant at the time of the examination you must tell us as soon as you know. We would expect candidates who are in their third trimester at the time of the examination to have informed us by the sixteenth week of pregnancy.

Any candidate who does not inform the College of her pregnancy and is consequently unable to sit for that examination will not normally be allowed to defer this examination without submission of another fee. Details of the candidate's expected week of confinement should be notified to the College and where possible, at the time of the application.

Deferral because of a spouse's confinement is not normally granted.

Each case will be assessed by the Examinations Manager together with the Dean. Candidates will be informed in writing of the outcome of their application for special consideration and of the arrangements that will be made to meet their needs.

Category	Special Provision(s)		
	Separate Rooms	Extra Time	Other
Visual impairment	Yes	Yes in written only	<ul style="list-style-type: none"> All written material whether in written examinations, orals or clinics enlarged, where possible Possible use of a computer in written examinations Possible use of a scribe to transfer MCQ answers to optically marked sheet Additional lighting Any photographic material should be enlarged Inform relevant examiners in orals and clinics
Hearing impairment or deafness	Yes (for orals)	No	<ul style="list-style-type: none"> Written instructions issued at the start of an examination or seated near front of examination hall Sign language interpreter Inform relevant examiners
Speech impairment	No	Possibly (in orals only)	<ul style="list-style-type: none"> Inform the relevant examiners in orals
Dyslexia	Yes	Written only	<ul style="list-style-type: none"> All written material in 'dyslexic friendly' fonts All written material on appropriately coloured paper if required Use of computer in essay style examinations Additional lighting Specific formatting Double marking of scripts
Mobility problems which may: <ul style="list-style-type: none"> Restrict access to certain rooms or ability to carry out clinical examination of patients Reduced ability to sit for long periods e.g. back or neck problems or later stages of pregnancy	Yes if access difficult Yes	No Yes	<ul style="list-style-type: none"> Ensure access is possible for all rooms and appropriate toilet facilities are available Adjustable chair In clinical examinations – patients in adjustable beds Adjustable chair
Wheelchair user	No	No	<ul style="list-style-type: none"> Ensure access is possible for all rooms and appropriate toilet facilities are available. Assistance with moving from station to station in the OSCE examination. Candidate instructions given to candidate to read whilst being moved from station to station. Any adjustments that are made in workplace are taken into consideration.

Difficulties with writing e.g. Arthritis or RSI	Yes	Yes written only	<ul style="list-style-type: none"> Use of a Scribe appointed by the College
Reduced stamina e.g. ME	Yes	No	<ul style="list-style-type: none"> Timetable oral or clinical examination in morning
Dietary problems e.g. Diabetes			<ul style="list-style-type: none"> Allowed to bring food/drink into the examination hall Provide refreshments at orals & clinical examinations
Mental Health Problems such as: <ul style="list-style-type: none"> Claustrophobia Agoraphobia Panic attacks 	Yes Yes Yes	No No No	Provision of a separate room in case the candidate suffers an attack and behaves in a manner that would disrupt the other candidates
Mitigating circumstances: <ul style="list-style-type: none"> Temporary conditions due to illness or injury on the day of the examination Disruption during the examination 	Possibly No	Possibly (Written only) No	Possible effect on performance <ul style="list-style-type: none"> May need scribe or disabled access depending on nature of injury Possible effect on performance <ul style="list-style-type: none"> To be considered by the examiners at the adjudication stage

Candidates should note that there is no extra time in OSCEs.

Data Protection

Under the Data Protection Act 1998, the information provided on your application form and your examination result may be processed and passed to examiners, your College Tutor, Postgraduate Dean, employer etc. for legitimate purposes connected with your training. If you registered or anticipate being registered with the GMC then your personal data, including your examination results, will be passed to the GMC for quality assurance and research purposes and to facilitate the awarding of certificates of completion of training (CCTs).

Disclosure of information

Under the Data Protection Act 1998, the information provided on this form and your examination result may be processed and passed to examiners, your College Tutor, Postgraduate Dean, employer, etc. for legitimate purposes connected with your training. If you are registered or anticipate being registered with the GMC then your personal data, including data about your examination results, will be passed to the GMC for quality assurance and research purposes and to facilitate the awarding of certificates of completion of training (CCTs).

Election to Fellowship and Annual Subscription fees

Persons holding a medical qualification and who have been successful in the Fellowship examination are eligible to apply for Fellowship of the College allowing use of post nominal 'FCEM'.

Every Fellow shall pay each year such annual subscriptions as may be determined by the Council of the College. Failure to pay the relevant subscription will render the post-nominals "FCEM" invalid.

Diploma ceremonies

New Fellows will be invited to the Annual Diploma Ceremony for the presentation of a diploma. Dates will be available on the website.

Alison Gourdie Medal

Each year, the candidate with the best overall performance from all successful candidates in both sittings will receive the Alison Gourdie Medal, awarded at the College Annual Autumn Scientific Meeting.

Appendix 1 – Programme of training

Suggested preparation plan for FCEM

This template is offered to indicate the required detail of a personal development plan, submitted in support of application for FCEM from a candidate who has not been successful on multiple occasions.

The exact format is not specified but the elements that are required are outlined:

Summary of examination attempts:

Date	Parts attempted	Parts successful	Parts failed

Summary of known deficiencies:

Clinical SAQ	
OSCE	
Critical Appraisal	
Management	
CTR	

Summary of discussion of trainee strengths and weaknesses, based on observation AT WORK

Personal objectives and learning outcomes: these depend on the deficiencies listed above but should be articulated in response to feedback

For example if the candidate failed the Critical Appraisal because of lack of knowledge of statistics, failed both double stations, and was unable to select priority actions in the SAQ, the learning outcome might be:

Define and utilise basic statistical terms listed on the College website

Lead a resuscitation with clear instructions and feedback to team members, with good scores on the College generic sheets

Interpret clinical data with accuracy and clearly describe the priority steps to be taken to treat any abnormality

Learning plan

Date	Activity	supervisor
October	Supervised practice – all shifts in resus, team leader for resuscitations	Dr XX
November	4x Unseen paper – abstract creation and description of statistical tests used – written answers to be returned each week	Dr YY
December	Weekly 1 hour session – review of all clinical results and 20 abnormal x-rays with Consultant – describing the abnormality and listing the priority actions	Dr XX

Signed:
Trainee.....

Date

Signed:
Trainer/Supervising Consultant.....

Date