

Alternative Certificate to Enter ST3 DRE-EM Specialty Training 2025

Instructions to applicants:

This certificate is required by candidates applying for emergency medicine the year 1, DRE-EM posts who are required to demonstrate acquisition of capabilities equivalent to those achieved in ACCS EM training in year 1 of CT1 or equivalent, or MRCS with Core surgical training in an approved surgical training programme or its equivalent.

When using this certificate, please note:

- Unless you have exceptional circumstances, e.g. you are a refugee, you will be required to submit the fully completed certificate with your DRE-EM application, so it is advised that you prepare your documents in advance.
- This certificate can only be signed by a consultant in Emergency Medicine.
- Consultants are only eligible to sign these certificates if they have worked with you for a minimum continuous period of three months whole time equivalent within the 3½ years prior to the advertised start date; certificates must have been signed subsequent to this date.
- The three months should be wholly within the time limit, is whole-time equivalent and could be spread out over a period much longer than this; for example, if you are doing research but have been undertaking clinics during this time to maintain your clinical skills, the three months may be spread over the three-year period.
- If your signatory is registered with any medical regulatory authority other than the GMC, then you should also make sure they submit current evidence of their registration with that authority. A certified translation should be included if this is not in English. Historic registration with the GMC will not be accepted. The signatory must have worked within the NHS in the last five years and have an accurate knowledge of the EM core and intermediate curriculum. Failure to provide this will result in your application being rejected.
- You should not use a signatory with whom you have a close personal relationship.
- You must have all capabilities and competences listed on this certificate signed off, either personally witnessed or via second-hand evidence, by time of application to be eligible. If you cannot demonstrate that you have achieved all your professional capabilities in one post, you may submit additional evidence to the signatory who, if they agree that it demonstrates capability/competence may accept it in lieu of direct observation. If you cannot demonstrate every professional capability, you will not be eligible for specialty training at DRE-EM level.
- The standard you are required to have achieved to be eligible for DRE-EM entry is an entrustment score of 2a – i.e. ‘supervisor on the ‘shop-floor’ (ED), monitoring at regular intervals in the ACCS Learning Outcomes 2, 3, and 6, and 2b in LO 1 and 4.
- You do not need to have demonstrated all capabilities or competences within the time period in which you have worked with the signatory, but whoever is signing the form needs to be satisfied that there is no reason why these are in doubt and that they believe you are sufficiently able to enter at the level of DRE-EM.
- The certificate **MUST** be complete in every detail, including details about the person completing it for you. Incomplete certificates may lead to your application being deemed ineligible for that recruitment round. It is strongly recommended that you check the form after your signatory has completed it.
- You must then scan, upload and attach it (as one single document) to your application form before submission.
- 2024 and 2025 are the only version of the certificate which will be accepted for the 2025 recruitment year, no other alternative certificates will be accepted.

Alternative Certificate to Enter ST3 DRE-EM Specialty Training 2025

Please note that it is a matter of professional probity for both applicant AND consultant signatory to complete this form accurately and honestly. Any false declaration in this form will result in any offer of a training post being withdrawn and consideration being given to you and/or your consultant signatory being referred to the GMC or other appropriate regulator.

Applicant Name			
Applicant GMC No			
Posts: Please complete the table below to document the posts in which you worked with your certificate's signatory(ies).			
Role/Job Title	Employer Name	Post Start Date	Post End Date
Applicant declaration	I confirm that I have attained all of the professional capabilities signed off in this form and that I have worked for the consultant who has completed this certificate for a minimum continuous period of three months whole time equivalent within the three and a half years prior to the advertised post start date for which I am applying.		
	I can confirm I follow the guidance in Good Medical Practice (or equivalent) relating to prescribing for self, friends, or family		
	I confirm that I am not related to, or in a relationship with the signatory of this form		
Applicant Signature			

THE FOLLOWING SECTION IS TO BE COMPLETED BY THE CONSULTANT:

INSTRUCTIONS FOR CONSULTANT COMPLETING THIS FORM:

Please complete one of the three boxes on the right-hand side for ALL competences as follows:

- Tick the box for those capabilities you have personally witnessed and those which you are unable to confirm
- Enter the initials of your colleague in the corresponding column where you are signing off a capability you have not personally witnessed. **If this is via reviewing an ePortfolio, please initial it with 'EP'.**

Section 1: Professional behaviour, trust and communication [*please note: if you are relying on evidence received rather than personally witnessing demonstration of these capabilities, please also complete the evidence section on page 12 detailing this evidence]		Personally witnessed	Evidence received*	Unable to confirm
	The competencies shown below may be demonstrated by a review of the trainee's portfolio. This review must specifically include the comments from multiple consultant reports, the educational supervisor reports, MSFs, workplace based assessments while considering the following categories:			
1.1 Professional behaviour	Acts in accordance with GMC guidance (or equivalent) in all interactions with patients, relatives/carers and colleagues; acts as a role model for other healthcare workers; acts as a responsible employee; AND complies with local and national requirements e.g. completing mandatory training, engaging in appraisal and assessment.			
1.2 Personal organisation	Attends on time for all duties, clinical commitments and teaching sessions; supervises, supports and organises others to ensure appropriate prioritisation, timely delivery of care and completion of work, including handover of care; AND delegates or seeks assistance when required to ensure that all tasks are completed			
1.3 Personal responsibility	Takes personal responsibility for clinical decisions, is able to justify actions, accepts responsibility for any personal errors and takes suitable action e.g.: seeking senior advice, apologising, making appropriate records and notifications			
1.4 Patient centred care	Considers the patient as a whole, respecting their personal circumstances, dignity, autonomy, individual healthcare decisions, and right to privacy; works with patients and colleagues to develop individual care plans; respects patients' right to refuse treatment and/or to decline involvement in research projects			
1.5 Trust	Acts with empathy, honesty and sensitivity in a non-confrontational manner; discusses management options with patients; responds to patient's ideas, concerns and expectations; encourages patients to make informed decisions; AND recognises patients' expertise and helps them to acquire knowledge of their condition			
1.6 Consent	Obtains valid consent for procedures by giving each patient the information they want and need in a way they can understand; demonstrates understanding of the principle of involving children in the decision-making process when they are able to understand and consider the options			
1.7 Ethical and legal requirements	Practises in accordance with guidance from the GMC or equivalent, relevant legislation and national and local guidelines; demonstrates understanding of the risks of legal and disciplinary action if a doctor fails to achieve the necessary standards of practice and care; AND completes statutory documentation correctly e.g. death certificates			
1.8 Confidentiality	Describes and applies the principles of confidentiality in accordance with GMC guidance or equivalent and local information governance standards; follows GMC (or equivalent) guidance on the use of social media; AND describes when confidential information may be shared with appropriate third parties e.g. police			
1.9 Mental capacity	Performs mental state examination and assessment of cognition and capacity where appropriate; demonstrates understanding that there are situations when it is appropriate for others to make decisions on behalf of patients; AND demonstrates understanding			

Alternative Certificate to Enter ST3 DRE-EM Specialty Training 2025

	that treatment may be provided against a patient's expressed wishes in certain defined circumstances			
1.10 Protection of vulnerable groups	Demonstrates understanding of the principles of safeguarding children and vulnerable adults; AND manages situations where safeguarding concerns may exist			
1.11 Self-directed learning	Acts to keep abreast of educational / training requirements; demonstrates change and improvement in practice as a result of reflection on personal experience and feedback; AND identifies and addresses own learning needs			
2.1 Communication with patients, relatives + carers	Introduces themselves to patient/carer/relative stating name and role; communicates clearly, politely, considerately, with understanding and empathy; ensures sufficient time and appropriate environment for communication; provides the necessary / desired information; AND communicates complex information clearly			
2.2 Communication with patients	Checks patients' understanding of options and supports patients in interpreting information and evidence relevant to their condition; AND responds to patients' queries or concerns			
2.3 Communication in challenging circumstances	Uses appropriate styles of communication; breaks bad news compassionately and supportively; AND manages three-way consultations e.g. with an interpreter, using sign language, or with a child patient and their family/carers			
2.5 Patient Records	Maintains accurate, legible and contemporaneous patient records AND ensures that entries are signed and dated			
Verifying consultant's signature confirming details above:				
Applicants name:		Date of completion:		
Section 2: ACCS learning outcomes.				
[*please note: if you are relying on evidence received rather than personally witnessing demonstration of these capabilities, please also complete the evidence section on page 12 detailing this evidence]				
ACCS LO1: Care for the physiologically stable adult patient presenting to acute care across the full range of complexity. (Required at the level of 2b - supervisor within the hospital for queries, able to provide prompt assistance/direction)	This doctor can gather appropriate Information, perform a relevant clinical examination and be able to formulate and communicate a management plan that prioritises patient's choices and is in their best interests, knowing when to seek help.			
	This doctor can assess and formulate a management plan for patients who present with complex medical and social needs or who manifest as one of the frailty syndromes			
ACCS LO2: Make safe clinical decisions, appropriate to level of experience, knowing when and how to seek effective support. (Required at the level of 2a - When the supervisor is on the 'shop-floor' (e.g. ED, theatres, AMU, ICU), monitoring at regular intervals).	This doctor can understand how to apply clinical guidelines, use diagnostic tests in ruling out key pathology, and be able to describe a safe management plan, including discharge when appropriate, knowing when help is required.			
	This doctor is aware of the human factors at play in clinical decision making and their impact on patient safety.			
ACCS LO3: Identify sick adult patients, be able to resuscitate and stabilise and know when it is appropriate to	This doctor can recognise and manage the initial phases of any acute life-threatening presentations including cardiac arrests and peri-arrest situations.			
	This doctor can provide definitive airway, respiratory and circulatory support to critically ill patients.			

Alternative Certificate to Enter ST3 DRE-EM Specialty Training 2025

Stop. (Required at the level of 2a - When the supervisor is on the 'shop-floor' (ED), monitoring at regular intervals).	This doctor can establish the most appropriate level of care for critically unwell patients including end-of-life decisions and support their needs as well as those of their loved ones.			
--	---	--	--	--

ACCS LO 4: Care for acutely injured patients across the full range of complexity. Required at the level of 2b (supervisor within the hospital for queries, able to provide prompt assistance/direction).	This doctor can be an effective member of the multidisciplinary trauma team.			
	This doctor can assess, investigate and manage low energy injuries in stable patients.			
ACCS LO 5: Procedural skills related to the Emergency Medicine posts only	The doctor has the clinical knowledge to identify when the following practical emergency skills are indicated, and has the knowledge and psychomotor skills to perform the skill safely and in a timely fashion.			
	Chest drain: open technique – The doctor is able to perform this procedure under direct supervisor's observation/ involvement, and able to provide immediate direction or assistance (Entrustment Scale of 1).			
	Fracture/ dislocation manipulation – The doctor is able to perform this procedure under direct supervisor's observation/ involvement, and able to provide immediate direction or assistance (Entrustment scale of 1).			
	Point of care ultrasound only for fascia iliaca block – This doctor must be able to perform this procedure when the supervisor is on the 'shop-floor' (ED), monitoring at regular intervals (Entrustment scale of 2a).			
ACCS LO 6: Deal with complex and challenging situations in the workplace. (Required at the level of 2a - When the supervisor is on the 'shop-floor' (e.g. ED, theatres, AMU, ICU), monitoring at regular intervals).	This doctor knows how to reduce the risk of harm to themselves whilst working in acute care,			
	This doctor can understand the personal and professional attributes of an effective acute care clinician.			
	This doctor is able to behave effectively manage their own clinical workload.			
	This doctor is able to deal with common challenging interactions in the workplace.			
ACCS LO 9: Support, supervise and educate	This doctor is able to set learning objectives for and deliver a teaching session, and able to deliver effective feedback to a junior colleague or allied health professional with an action plan.			
ACCS LO10: Participate in research and managing data appropriately	This doctor can search the medical literature effectively and knows how to critically appraise studies.			
ACCS LO 11: Participate in and promote activity to improve the quality and safety of patient care	This doctor has evidence of contributing effectively to a departmental quality improvement project			

Verifying consultant's signature confirming details above:

Applicants name:		Date of completion:	
-------------------------	--	----------------------------	--

******Please make sure that you now sign the declaration on the next page******

Alternative Certificate to Enter ST3 DRE-EM Specialty Training 2025

Declaration by person signing this certificate:			
REMINDER: We would wish to remind signatories of their professional responsibilities under the General Medical Council's guidance "Good Medical Practice" (paragraph 71) which states that " <i>you must do your best to make sure that any documents you write or you sign are not false or misleading. This means that you must take reasonable steps to verify the information in the documents</i> ". Failure to do so renders you, the signatory, at risk of being referred to your regulatory authority (the GMC or equivalent). Patient Safety must remain your primary concern.			
Your name:			
Professional status:			
Current post:			
Dates supervised applicant:		From:	To:
Address for correspondence:			
Email address:			
Your UK GMC Number:			
Signatories without full GMC registration:			
If you do not hold full registration with the UK GMC, please give details below and you will need to provide the applicant with photocopy evidence of your current registration with that body to this certificate. A certified translation should be included if this is not in English. Historic registration with the GMC will not be accepted. <i>Failure to provide this will result in the applicant being rejected.</i>			
Name of registering body:			
Your Registration Number:			
NHS experience please give details of your experience working in the NHS within 5 years of signing this certificate			
Role/Job Title	Employer Name	Post Start Date	Post End Date
For all signatories (<i>This form is invalid unless boxes A, B C and D above are ticked</i>):			
A) <input type="checkbox"/> I confirm that I am aware of the standards expected of doctors completing Emergency Medicine Core Training curriculum and that I have first-hand knowledge of working within the NHS. Furthermore, I have worked within the NHS for at least six months in the 5 years prior to signing the certificate			
B) <input type="checkbox"/> I confirm that the doctor named above has worked for me prior to their application submission and continuously for a minimum of three months whole time equivalent within the 3½ years prior to the advertised start date			
C) <input type="checkbox"/> I can confirm that I have observed the doctor named above demonstrate all of the listed capabilities and competences OR where I have not personally observed them , I have received alternative evidence that I know to be reliable from a colleague working satisfactorily at a level of a senior trainee (i.e. at least ST5) or above. I have listed those providing evidence on the next page.			
D) <input type="checkbox"/> I confirm that I am not related to, or in a relationship with the applicant			
For all signatories (<i>This form is invalid unless boxes A, B C and D above are ticked</i>):			
Verifying consultant's signature confirming details above:			
Applicants name:		Date of completion:	

Alternative Certificate to Enter ST3 DRE-EM Specialty Training 2025

HOSPITAL STAMP If not available, please attached a signed compliment slip and give hospital name and website address			
List of people whose evidence I have used in signing this certificate:			
Where I have not personally observed them, I have received alternative evidence that I know to be reliable from a colleague working satisfactorily as a senior trainee (i.e. at ST5 or above) or above, as detailed below. Please ensure that you enter the section/s of the certificate where each individual has observed outcomes. <i>Please note that, as part of the verification process, the recruiting process may contact these people to verify and confirm that they have provided you with such evidence:</i>			
Person 1			
Their name			
Professional status:			
Work address:			
Email address			
Person 1			
Their name			
Professional status:			
Work address:			
Email address			
Person 1			
Their name			
Professional status:			
Work address:			
Email address			
Verifying consultant's signature confirming details above:			
Applicants name:		Date of completion:	