

FICM Career Event

Organiser Handbook

Autumn 2018

The Faculty of
Intensive Care Medicine



Introduction for Organisers

The aim of this 'virtual event' is to provide accurate and up to date information that can be used by those involved in ICM training to run local or regional careers events.

We have produced a series of lectures and handouts, along with a guide suggesting the content for each of the following topics:

1. Welcome and introduction
2. So you want to do ICM
3. Core training in ICM
4. Specialty training in ICM
5. How to prepare for an ICM interview
6. What to expect at an ICM interview
7. Summary and discussion

The lectures are intended to be modified for local use: slides with local information – for example the names of those running the event, where to go for further advice, numbers of posts – can be added by the organisers. All the slides are presented as a single slide set for ease of use.

We have also provided an agenda, a suggested timeline for your event and feedback form. A companion 'delegate handbook', which contains an agenda, handouts from all the presentations, is available as a separate document.

We hope that the documents prove useful!

Jonathan Goodall
Careers Lead on behalf of the CRW Committee of the FICM
September 2018

Organisational Requirements

1. Faculty

It is recommended that a minimum of 3 faculty run the event. Ideally the Faculty will include one or two senior trainee who have experience of the recruitment process and the training scheme: trainees are well placed to deliver lectures around the interview process and what to expect, and can contribute to the panel discussion at the end of the event.

2. Equipment

Essential: Computer and data projector

Recommended: Flip chart and pens to capture discussion points.

3. Handouts

The Handbook provides a sample agenda and feedback forms in PDF format, which can be printed for immediate use or used as a guide for locally tailored documents.

The handbook also provides a outlines of all the slide sets which could be used as handouts of the presentations if required.

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FICM Careers Event: Suggested Timeline

1. Welcome and introductions (5mins)*
2. Aims and Objectives of this event (5 mins)*
3. So you want to do ICM? (15 mins)
4. Core Training in ICM (15 mins)
5. Specialty Training in ICM (20 mins)
 - a. Single CCT, Dual CCT
 - b. LTFT training, career breaks etc
6. How to prepare for an ICM Interview (10 mins)
7. What to expect at an ICM interview (10 mins)
8. Summary and discussion (30-45 mins)

*Lectures 1 and 2 are in one slide set

Introduction and Overview – Content Outline

Suggested Timeline: 5 mins

Suggested Presenter: Event organiser

Aim of Introduction and Overview Presentation

The aim of this lecture is to set the aims and objectives for the career event

Slide 1: Title Slide

Slide 2 - Aims

This slide covers the aims of the event and how it provides ‘authorised’ information from the FICM which is accurate and up to date. It is suggested that at this point the following are discussed:

- Welcome the trainees to the session
- Introduce the faculty
- Understand who is in the audience
- Outline the event and what will be covered

Slide 3 – Overview

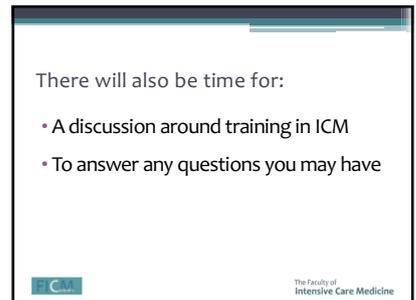
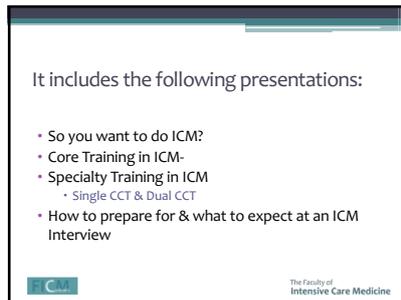
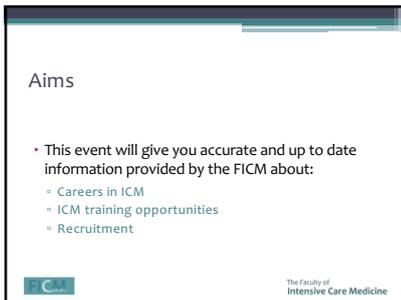
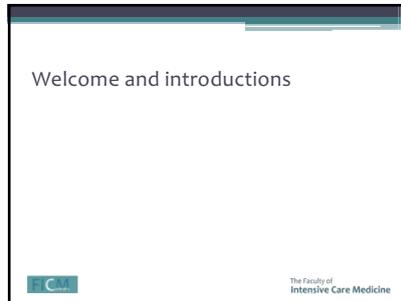
This slide describes what will be covered during the event itself including what a career in ICM can offer, before moving on to information about training in ICM and recruitment to ICM training programmes.

Slide 4 – Any questions?

Invite questions and check that there are no outstanding issues before moving to a summary of the presentation

Slide 5 – Summary of Introduction and Overview

Use the summary slide to re-inforce the aims and objectives of the event and what it will cover.



So you want to do ICM: Content Outline

Suggested Timeline: 15 mins.

Suggested Presenter: Local consultant in ICM

Aim of Presentation

The aim of this lecture is to set out the scope of practice of a consultant in intensive care medicine.

Slide 1: Title Slide

Slide 2: Describe the aims of what the lecture will cover

Slide 3: A career in ICM

This slide broadly covers the scope of practice of the ICU consultant. It aims to emphasize we have a diagnostic role as well as a role in organ support. It aims to highlight the role the ICU consultant plays during a patient's ICU stay and beyond.

Slide 4: Intensivists manage

This slide describes the huge breadth of conditions managed by intensivists and is intended to highlight we are not 'single organ' doctors, and we are the ideal specialty for doctors who want to manage 'everything.'

Slide 5: Intensivists perform

This slide lists some of the practical procedures undertaken by intensivists. It aims to enthuse audience members by emphasizing the large variety of practical skills that will be acquired by those training in ICM.

Slide 6: What makes ICM unique

This slide should be used to discuss the broad scope of ICU practice, and the wide variety of staff groups intensivists work with, and the teamwork that is central to the running of an ICU. Presenters can use examples of case mix in local ICUs.

Slide 7: Challenges of a career in ICU

This slide touches on the challenges that may be faced during ICU training and consultant practice

Slide 8: Benefits of a career in ICM

This slide should be used as a counterpoint to the previous slide.

Slide 9: What are intensivists made of

This slide should be used to discuss the personal attributes that make a successful intensivist, emphasising the fact we work in teams and have to provide calm, effective leadership in often time pressures high stakes situations. Presenters can use local examples.

Slide 10: Any Questions?

Slide 11: Summary

This slide should be used to dispel commonly held myths about what a 'typical' intensivist is like. It may be appropriate to highlight that ICM is a female and family-friendly specialty with much better work life balance than might otherwise be thought, and can embrace a wide variety of personality types.

So you want to do ICM?

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Aims

- This presentation will cover:
 - What is an intensivist?
 - What conditions do they help manage?
 - What skills do they have and what procedures do they perform?
 - What makes ICM unique?
 - The challenges of a career in ICM
 - The rewards and benefits of a career in ICM
 - What intensivists are made of!

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A career in ICM

- ICM specialists are involved in all aspects of the care of critically ill patients
- Intensivists provide organ support along with investigations, diagnostics and treatment of acute illness.
- We are very involved with patient safety, ethics, end of life care and the support of patients and families through their stay in ICU and beyond.



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Intensivists manage:

- Heart failure
- Renal failure
- Liver failure
- Brain injury
- Sepsis
- Respiratory failure
- Multi-trauma
- Acute intoxication and poisoning
- Post-major surgery organ support

Everything!

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Intensivists perform:

- Emergency intubation
- Mechanical ventilation
- Invasive cardiovascular monitoring
- Percutaneous tracheostomy
- Point of care ultrasound
- Renal replacement therapy
- Bronchoscopy
- Transfer of the critically ill patient

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What makes ICM unique?

- We don't just deal with one organ system
- ICM encompasses the entire spectrum of medical and surgical pathology.
- The ICU functions as a team within the hospital: intensivists, visiting specialists, nursing staff, ACCPs, pharmacists, physiotherapists, microbiologists, speech and language therapists...
- Intensivists work with virtually every staff group in the hospital.

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Challenges of a career in ICM

- If you choose to train in ICM with another specialty (Dual CCT) this lengthens training
- ICM training means an extra set of professional exams
- A considerable proportion of clinical work is out-of-hours.
- There is a very high level of consultant led care
- The emotional burden of managing critically ill patients can put intensivists at risk of burnout

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Benefits of a career in ICM

- Multi-specialty case mix
- Multi-disciplinary team working
- Practical procedures
- Physiology and pharmacology in action
- Challenging but very rewarding decision making

... there is always someone there to work with and chat to!

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What are intensivists made of?

- Clinical curiosity and attention to detail
- The ability to remain calm in critical situations
- The ability to work with and lead the MDT
- The ability to communicate with other specialties constructively
- The ability to communicate with patients and families clearly and compassionately

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Any questions?



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Summary

- Intensive care medicine is an immensely rewarding specialty
- ICM is a 'multi-faceted' specialty which interacts with the rest of the hospital
- Intensivists work closely with other specialists and the multidisciplinary ICU team
- At times ICM can be challenging and demanding
- A career in ICM can suit a wide variety of personalities and there is no such thing as a 'typical' intensivist



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Core Training in ICM: Content Outline

Suggested Timeline: 15 mins

Suggested Presenter: Local Consultant in ICM

The aim of this lecture is to familiarise trainees with Core training for ICM

Slide 1: Title Slide

Slide 2: Aims and objectives of the talk

Describe the content of the presentation & what will be covered

Slide 3: Core Training

Gives objectives for the talk- introduction to basic routes into ICM, and How to make the most of core ICM

Slide 4: Routes into ICM Training

Brief overview of core training- how there's no ICM core training but ACCS, CMT and Core Anaes training are all potential entry points

Slide 5: Routes into ICM: ACCS

Explains briefly what is involved in ACCS training – have deliberately not mentioned exact duration of ICM module- some deaneries only do 3 months ICM

Slide 6: Routes into ICM: Medical Training

A brief discussion re upcoming changes to CMT

Slide 7: Routes into ICM: Core Anaesthetic Training

Brief explanation of CAT

Slide 8: Tips for A Core Training ICM Module

Attempts to give some useful pointers on goals for ICM module

Slide 9: What can ICM teach me?

Brief outline of what trainees should aim to learn in their ICM placement. Have deliberately not put in practical procedures- even though trainees are often very keen to learn them.

Slide 10: How can an ICM placement help me?

Talks about CV building, accessing guidance etc. Useful to have local examples for this

Slide 11: Any questions?

Slide 12: Summary slide

Summarise the key points of the lecture before closing and moving to the next presentation

Core Training

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Aims

- We will briefly explore
 - Routes into ICM specialty training
 - Enjoying your ICM placement
 - Targeting your portfolio for ICM



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Routes into ICM training

- At present there is no core training in ICM
- Currently you can enter ICM specialty training through:
 - ACCS
 - Core Medical Training (IM stage 1 training from 2019)
 - Core Anaesthetic Training

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Routes into ICM training: ACCS

- This will be badged as ACCS (Acute Medicine), ACCS (Anaesthesia) or ACCS (Emergency Medicine)
- ACCS training lasts for an indicative 3 years
- All trainees rotate through Acute Medicine, Emergency Medicine, Anaesthesia and ICM
- To successfully complete an ACCS training programme you must achieve the appropriate assessments and specialty examination (ie MRCP/MRCEM/FRCA Primary)

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Routes into ICM training: Medicine

- Traditionally this has been from 'Core Medical Training' (CMT)
- This will become 'Internal Medicine (Stage 1) Training' (IMT) from Aug 2019
- IMT programmes are for an indicative 3 years
- All IMT trainees will rotate through ICM
- Expected to complete MRCP(UK)

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Routes into ICM training: Anaesthesia

- Core training in anaesthesia (CAT) lasts an indicative 2 years
- All trainees do at least 3 months of ICM
- Expected to complete Primary FRCA

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Tips for A Core Training ICM Module

- Core training is a good time to help you decide if you want to pursue ICM as a career
- You may start consider if you would prefer to train in ICM alone or with another specialty (single or dual specialty training)
- Remember: dual specialty training means extra exams!
- Treat every rotation in core training as your only job so you can get the best out of it

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What can ICM teach me?

- Take this opportunity to learn to manage sick patients
- Learn to work with the MDT in ICM
- Explore physiology at the bedside
- Learn how to have end of life discussions with patients and families

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How can ICM placement help me?

- Find a mentor
- Ideal chance to score portfolio points
 - There are always audits and QI projects available
 - Present posters, go to conferences, do resuscitation courses

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Any questions?

Summary

- We have discussed:
 - The different routes into ICM specialty training
 - How to enjoying and make the most of an ICM placement
 - How an ICM placement can help you prepare your your portfolio for a career in ICM

Specialty Training in ICM - Content Outline

Suggested duration: 20mins

Suggested speaker: Specialty Trainee

Slide 1: Title slide

Slide 2: Aims

Give an introduction, outlining various methods of obtaining CCT in ICM and the topics to be covered over course of presentation

Slide 3: Entry Requirements

Give a brief overview of how training progresses and where recruitment to ST3 sits
You may wish to go into further detail about ST3 recruitment process

- National recruitment
 - paper application form
 - interview day (held in Birmingham – central recruitment coordinated by West Midlands Deanery)
 - Portfolio/Clinical/Presentation/Task Prioritisation/Reflection stages

Slide 4 & 5: ICM only (Single CCT) ICM Training

These slides detail on entry routes into ST3 will have already been mentioned in previous talk. The aim of this slide is to show how Stage 1 allows for some flexibility to enable trainees to achieve competencies in areas not covered during their core training

- 7 years including Core Training
- Entered following completion of one of: ACCS, Core Anaesthesia training, Core Medical Training and after passing relevant primary examinations (see previous slide)
- 3 stages
 - Stage 1
 - CT1 – ST4
 - Minimum 12mths in each of: ICM, anaesthesia and medicine during this time
 - additional 12 months in this Stage is for exposure to acute specialist training and addresses the fact that not all of the ICM multiple cores are of the same length and content; anaesthesia Dual trainees will therefore spend this time training in anaesthesia (single ICM CCT trainees may undertake this time in any of the acute specialties – depending on the needs of the service and local availability)
 - Stage 2
 - ST5-6

- 3 months PICU, NICU, Cardiac ICU
- 12 mths special skills
- FFICM examination in this time (see later slide)
- Stage 3
 - ST7
 - Final 12 mths advanced training

Slide 6, 7, 8, 9: Dual CCT Training

- Entry from ACCS or CAT
- additional time in Stage 1 for CAT entry trainees to allow for additional 12months in AIM
- Must have Primary FRCA by start of ST3
- Must have Final FRCA by end of Intermediate Anaesthesia Training and end of Stage 1 ICM before progress to Higher Anaes and Stage 2
- Special study year spent in Anaesthesia
- Red asterix = counts for competencies in both CCTs
- i.e. entirety of Stage 2 and 3 ICM is dual countable with Higher and advanced anaesthetic training

Slide 10: 'Specialist' ICM within Training

During Stage 2 all trainees will rotate through the specialty ICUs

- Speaker may wish to outline what to expect during their time on these units

Slide 11: Special Skills Year

- For those Dual CCT will be spent in partner specialty
- Standalone CCT allows for additional learning experience in any of the example areas shown
- Dual trainees may also do an additional specialty skills year if they so wish, but this will further extend their training by 1 year

Slide 12: Assessments

Aim of this slide is to outline the day-to-day assessments that are required to show progression and attainment of the various curriculum competencies. As well as “traditional” ward based assessments, trainees can also use e-ICM modules as evidence of learning.

Speaker may wish to explain other ARCP requirements such as logbooks, 30 cases and reflection

Slide 13: FFICM exam

Required to complete Stage 2 training

Use this slide to explain the nature of written and SOE examinations

Slide 14 & 15: Career breaks, LTFT training, OOPE and OOPTs

All are feasible within each locality subject to LETB and FICM approval +/- partner College approval. Trainees are encouraged to speak with their local RA/FT for individual guidance.

NB Speakers may wish to emphasise that it is the trainees responsibility to ensure OOPE/OOPT are meticulously arranged both locally within their Deanery and with their host trainer to ensure attainment of relevant competencies.

Slide 16: Any questions?

Slide 17: Summary slide



Overview

- Routes
 - Single CCT
 - Dual with
 - Anaesthesia
 - Emergency Medicine
 - Acute Internal Medicine
 - Renal Medicine
 - Respiratory Medicine
- Assessment and examinations
- Less than full-time training
- Out of programme experience/training

Entry Requirements

- Completion of
 - FRCA (Primary)
 - MRCPUK (full)
 - MCEM (full)
- National recruitment at ST3

ICM only (single) CCT 1

ICM only (single) CCT 2

Dual CCT: ICM & Anaesthesia

Dual CCT: ICM with EM

Dual CCT: ICM with Acute Medicine

Dual CCT: ICM & Respiratory or Renal Medicine

'Specialist' ICM within training

- Paediatric
- Neuro
- Cardiac
- General



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Special Skills Year

- During stage 2 training in ICM
- For those doing single CCT only
 - Academic ICM
 - Management
 - Pre-hospital medicine
 - Education
 - Echocardiography
- Dual trainees spend this time pursuing training in their partner specialty



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Assessments during ICM training

- Workplace based assessments
 - CBD
 - Mini-CEX
 - DOPS
- 30 Cases
- Logbooks
- Portfolios



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FFICM Examination

- Required for progression to Stage 3
- Written
 - 50 MCQs
 - 50 SBAs
- Structured Oral Examination
- OSCE



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Training extension

- Career breaks
 - Personal/professional reasons
- LTFT
 - Pro-rata basis
 - Local Educational Training Board
 - Liaise with RA/FT within your Deanery



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Out of programme training

- Training (OOPT)
 - Must have completed stage 1 in entirety
 - Must map to competencies in CCT programme
 - Must be prospectively approved by GMC, Postgraduate Dean, FICM and college
 - One year in total and includes a written report
- Experience (OOPE)
 - A clinical or research post which does not counting toward CCT
 - Must prospectively inform the FICM



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Any questions?



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Summary

We have discussed:

- Training in ICM:
 - Single CCT
 - Dual with a partner specialty
- Assessment and examinations
- Less than full-time training
- Out of programme experience/training



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How to Prepare for an ICM Interview – Content Outline

Suggested Timeline: 10 mins

Suggested Presenter: ICM Consultant

The aim of this lecture is to set what should be done to prepare for an ICM interview

There is a great deal of information available to candidates already. The ICM National Recruitment office has an excellent series of resources, including guidance on the portfolio station, evidence of good and bad reflective writing examples and updated FAQs from the Faculty. Candidates should be prepared for a tiring day; the pace is fast and expertly controlled and time is of the essence. Candidates should take every opportunity to practice with supervisors, colleagues, consultants etc.

Emphasis on the layout and evidence contained within the portfolio, documentation that is not present or unable to be presented in the allocated time will not gain marks towards the score for that station. Encourage candidates to set out their portfolio in an easily accessible way, in order of the Portfolio Self-Assessment Matrix. Trainees often fall foul of time limitations and not being able to access the evidence in the portfolio easily.

Trainees should be reminded that the overall expectation of the interview process is to demonstrate that they are able to be trained in a higher specialist training programme in intensive care medicine. Advanced diagnostic and complex problem solving will not be explored in detail during any of the assessment stations.

There are plenty of ways in which applicants can prepare for the interview. Re-emphasise the importance of the portfolio evidence and how the trainee will access this in a time sensitive manner.

Applicants should be encouraged to practice reflective writing before attending the interview; often applicants spend a lot of time describing the event or scenario and do not spend the required time on reflection and learning from the event. There are examples of good and poor reflection on the ICMNRO website.

They should be encouraged to practice their presentation skills in a time sensitive way, using flip charts if necessary. Consider a random topic and construct a presentation around that.

The clinical assessment station involves a fictitious case with pertinent clinical material and perhaps a chest x ray or ECG. Applicants should prepare presenting summaries of cases with the relevant positive and negative findings and results. They should be practiced in constructing an initial management plan based on the case to hand. Trainees will be assessed as being at the start of higher specialist training.

Task prioritisation, there is often no absolute correct answer for this station, applicants should use the resources described in the narrative to the best skills fit possible to attend to the 5 clinical issues in the question. They should be prepared to justify their answers by providing explanation for their suggested plan.

Slide 1: Title Slide

Slide 2 - Aims

This slide covers the aims of the talk and what it will include

Slide 3 Preparing Your Portfolio

Use this slide to describe how the person specification can be used to prepare a portfolio: how it will highlight what they should include. It can be used to highlight what individuals can do to strengthen a future application. Make sure they have evidence for anything they are claiming to have done (including courses, presentations, exam successes etc). Encourage the trainees to develop an organised portfolio so they can access things they are asked for quickly and easily.

Slide 4: What to take to the interview

Ensure they know what documentation they should prepare and take with them, including passports etc.

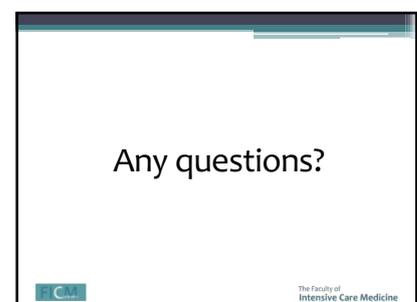
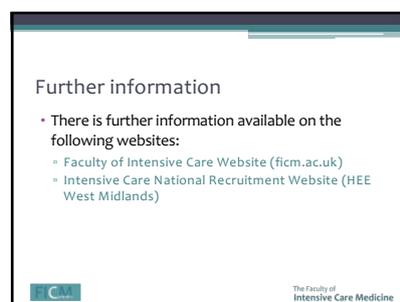
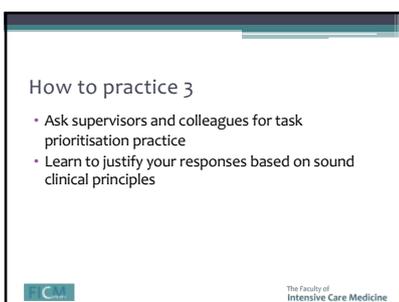
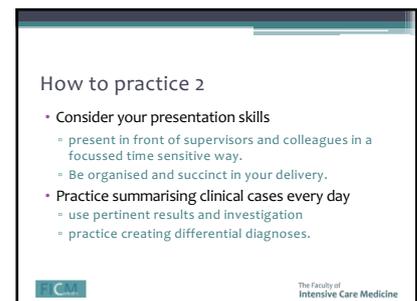
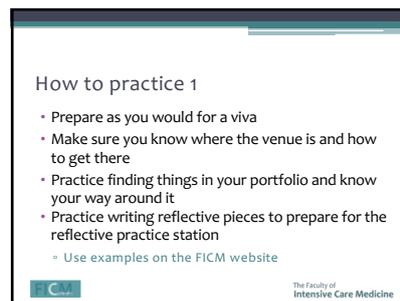
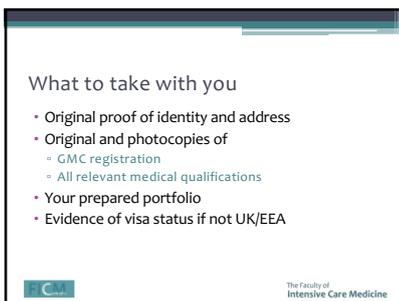
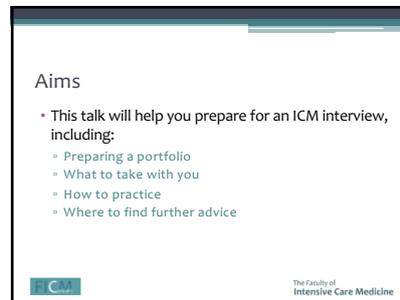
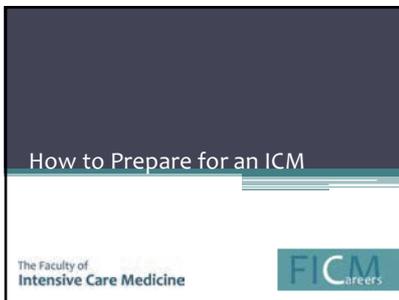
Slide 5, 6 & 7: How to practice

Describe how practicing the skills that will be 'tested' will aid their application. Encourage them to get practice with presentation skills and presenting clinical information succinctly and logically.

Slide 8 – Any questions?

Slide 9 – Summary

Use the summary slide to re-inforce the aims and objectives of the presentation



Summary

- We have outlined the importance of preparing for your interview
 - Preparing your portfolio
 - What to take with you
 - How to practice for the interview
 - Where to find further advice



What to Expect at an ICM Interview – Content Outline

Suggested Timeline: 10 mins

Suggested Presenter: ICM Trainee

The aim of this lecture is to set what should be expected at an ICM interview

If not covered in the previous talk, trainees should be reminded that the overall expectation of the interview process is to demonstrate that they are able to be trained in a higher specialist training programme in intensive care medicine. Advanced diagnostic and complex problem solving will not be explored in detail during any of the assessment stations.

There are plenty of ways in which applicants can prepare for the interview.

Slide 1: Title Slide

Slide 2: Aims

This slide covers the aims of the talk and what it will include

Slide 3 & 4: Venues

Use these slides to describe the venues and what they should expect when they arrive. The slide include photographs from previous recruitment at The Hawthorns.

Slide 5, 6 & 7: The ICM Selection Centre

Describe how the ICM selection centre works: 4 face to face and one written station (reflective practice). The slides have further photographs from previous recruitment rounds.

Re-emphasise the importance of the portfolio evidence and how the trainee will access this in a time sensitive manner.

Discuss and re-emphasise the need to practice reflective writing before attending the interview; often applicants spend a lot of time describing the event or scenario and do not spend the required time on reflection and learning from the event. There are examples of good and poor reflection on the ICMNRO website.

The clinical assessment station involves a fictitious case with pertinent clinical material and perhaps a chest x ray or ECG. Applicants should prepare presenting summaries of cases with the relevant positive and negative findings and results. They should be practiced in constructing an initial management plan based on the case to hand. Trainees will be assessed as being at the start of higher specialist training.

Task prioritisation, there is often no absolute correct answer for this station, applicants should use the resources described in the narrative to the best skills fit possible to attend to the 5 clinical issues in the question. They should be prepared to justify their answers by providing explanation for their suggested plan.

Slide 8 – Any questions?

Slide 9 – Summary

Use the summary slide to re-inforce the aims and objectives of the presentation

What to expect at an ICM Interview

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Aims

- This talk will help you prepare for an ICM interview
 - It will describe the venues
 - It will describe the 'Selection Centre' process and what it includes
- It will give you further tips on how to make the best of yourself and your portfolio

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Venues

- The ICM selection centre is commonly held in a football stadium
- These venues are usually close to motorway networks, are easy to find and have good parking facilities
- ICM recruitment 2019 will be held at West Bromwich Albion home ground 'The Hawthorns'



The Hawthorns

West Bromwich Albion Football Club

Address: Hawthorns, Edgbaston, Birmingham, B6 7AL

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Venues

- When you arrive you should report to the FICM registration desk
- Staff will check your details and explain the process you will follow
- Spend at least 3 hours at the selection centre



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The ICM Selection Centre

- The 'interviews' include five stations
 - Four of these are 'face to face' stations:
 - Portfolio
 - Presentation
 - Clinical
 - Task prioritisation
 - The face to face interviews are conducted in corporate 'boxes' at the stadium
 - You will be interviewed by a minimum of two FICM interviewers who are experienced in the process
 - There may also be observers in the room to ensure the fairness and quality assure the process, e.g. a lay representative



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The ICM Selection Centre

- In addition there is one written station
 - Reflective practice
- This is held in a larger room, and is conducted under examination conditions
- The written reports are then read and scored by a minimum of two FICM interviewers



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The ICM Selection Centre

- At the end of the process your scores from each station will be collated to provide an overall score
- Your scores are now entered collected & collated electronically to avoid transcription errors
- When the interview process is completed (after 3 or 4 days of interviews), candidates are ranked and job offers made where appropriate
- All interviewers are well briefed for the process to assure the fairness and quality of the selection centre



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Any questions?

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Summary

- ICM recruitment uses a five station 'selection centre':
 - Portfolio
 - Presentation
 - Clinical
 - Task prioritisation
 - Reflective practice (written)
- The interviews are conducted in a fair, transparent and quality assured way
- Further details and examples of questions can be found on the FICM website

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Summary, Discussion & Closure – Content Outline

Suggested Timeline: 30-45 mins

Suggested Presenter: Organiser to lead panel discussion

Aims

The aim of this session is to allow for discussion and answer any remaining questions. Organising this around a panel discussion would work well: it will allow questions to be answered by those who know the information best.

Allow plenty of time for this part of the event: it is often the most productive, and will leave the trainees feeling their questions have been considered.

At the end of the discussion give a brief summary of what has been achieved, and thank the presenters and trainees for attending and giving up their time.

Slide 1: Title Slide

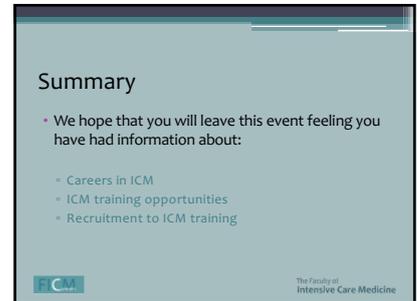
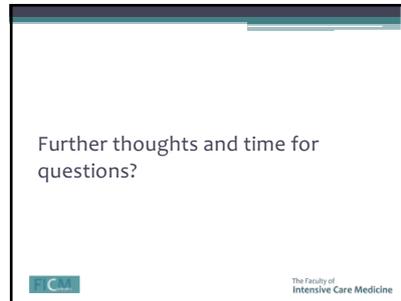
Slide 2: Discussion slide

Slide 3: Summary of the event

Use the summary slide to re-inforce the aims and objectives of the event and what has been covered.

The Faculty of Intensive Care Medicine

Summary and Discussion



The Faculty of **Intensive Care Medicine**

FICM Careers Event Agenda

1. Welcome and introductions
2. Aims and Objectives
3. So you want to do ICM?
4. Core Training in ICM
5. Specialty Training in ICM
 - a. Single CCT, Dual CCT
 - b. LTFT training, career breaks etc
6. How to prepare for an ICM Interview
7. What to expect at an ICM interview
8. Summary and discussion

Careers Event: Feedback

What is your current role (please circle):

Medical Student Foundation Doctor Core Trainee Specialty Trainee Other (specify)

Why did you attend this event?

What did you find useful?

Were there other topics you would like to be included?

Was there anything we should leave out?

Please rank the following on a scale of 1 to 5 (1 being the lowest score and 5 the highest)

1. Organisation of event	1	2	3	4	5
2. Venue	1	2	3	4	5
3. Content of slides	1	2	3	4	5
4. Relevance to me	1	2	3	4	5
5. Overall	1	2	3	4	5

Do you have any other comments?