



Diploma in Urgent Medical Care Study Guide



**This is not just a clinical exam
see the introduction**



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Introduction

It is necessary to start your exam preparation by understanding that this is not just a clinical exam. This exam is aimed at clinicians who already have experience in urgent care and wish to evidence this along with the other attributes expected from higher level clinicians. These include supporting less experienced colleagues, managing uncommon and emergency situations, resilience planning, quality control and improving patient care.

Candidates should look at all the documentation included in the application section of the Royal College of Surgeons of Edinburgh (RCS Ed) website. Further information on the exam is available on the FPHC website in the Urgent Care section of the My FPHC tab <https://fphc.rcsed.ac.uk/my-fphc/urgent-medical-care/about-the-dipumc-exam>

Aim of Exam

To allow clinicians already working in Urgent Care to evidence their professional development in Urgent Care.

Level of Exam

Candidates should carefully consider and aim their preparation towards the level of the examination as outlined in the exam documentation namely:-

*Skills for Health Career Framework Level 7 - People at level 7 of the career framework have a critical awareness of knowledge issues in the field and at the interface between different fields. They are innovative, and have a responsibility for developing and changing practice and/or 7 services in a complex and unpredictable environment.
Indicative or Reference title: Advanced Practitioner*

In terms of The Diploma in Urgent Medical Care this means:

Understand the principles, and their application to Urgent Care, by clinicians who have **day to day responsibility** for its provision. As an example, clinicians should be able to demonstrate the immediate management of clinical and non-clinical problems which occur in the community and be able to advise less experienced colleagues or are exceptional to normal provision. Successful candidates should feel empowered to maintain standards and help to improve the urgent care organisations they work in *and make best use of finite resources*. This empowerment requires an understanding not only of clinical topics but of all components of urgent care provided by health care, social care and the wider community. How improvements, advances of provision are made, standards maintained adverse events managed and those working in the system are protected, appreciated and developed. Understanding the information provided in this box explains the wide range of themes in the syllabus. . These principles are aligned to guidance for the professional development of senior practitioners in many health professions.

Examination Structure

Single Best Answer Papers

The written part the examination consists of two papers, each lasting 2 hours. Each of these has 90 Single Best Answer (SBA) questions to be answered. As these questions are testing the application of knowledge the stems, of the questions, are longer than those of questions that test only knowledge. Candidates are advised to consider this in advance and ensure they manage their time appropriately to ensure they answer all the questions.

At the beginning of each exam you will be provided with a question paper and an answer sheet. On the answer sheet (specimen provided in Appendix 2) you will be given instructions as to how to mark your answer, **with the pencil provided.** The answer sheet is marked by a machine so please do not write or draw anything, other than your answer choice, on the paper. Please note your candidate number has to be inserted, using the same system, on the top right hand corner of the paper.

Structured Oral Questions.

The SOQs take place in a large room which is partitioned by screens to make an individual stations. There's a piece of paper pinned to the outside of the screen describing the scenario. As soon as you hear a bell, walk to your allocated station and immediately start reading the instructions. You have a minute to read and absorb the information. When you hear another bell enter the station and will be greeted by the examiner(s). When you hear the next bell immediately leave and walk to the next station and start reading straight away. It can be quite a noisy environment. A short video giving some additional information is available at [Exam Video and Podcast Resources - The Faculty of Pre-Hospital Care \(rcsed.ac.uk\)](https://www.rcsed.ac.uk/exam-video-and-podcast-resources)

It is recommended you wear clothing that doesn't identify where you work or your job role. The examiners will only know your candidate number, not your professional background. It's important you're not displaying your job role on your clothing.

Examiners are trained not to respond positively or negatively to your answers. Please do not be put off by this, it doesn't mean your not doing well. Examiners are instructed not to provide any feedback to you during the exam.

For some stations you may finish early. Examiners are instructed not to engage the candidate in conversation at this time. They are not being rude, they are just following examination guidance. That's fine. You will need to remain in your station but take the opportunity to have a drink, clear your mind and relax. The time is still yours to get marks – if you think of something else you want to do or say – do so!

When the bell rings immediately move on. Previous candidates have suggested you forget about what you did/didn't say and focus on the next question, otherwise you could lose marks. Drink water that's available if you're thirsty – you do a lot of talking and may have a dry mouth from nerves!

Pass Mark

The Royal College of Surgeons of Edinburgh prides itself on the quality and reliability of its examinations. For this reason all questions are standard set and closely monitored by the College psychometricians to ensure each question performs to College standards. For this reason no pass mark can be published and results are not available for at least 4 weeks after the exam.

The exams and marking system are the same for everyone, regardless of your profession.

Examination Themes

1	Working in Urgent Medical Systems
2	Providing Urgent Medical Care
3	Using Technology in Urgent Medical Care
4	Managing Safe Dispositions
5	Risk Management
6	Urgent Care Preparedness
	Operational Practice
	Human Factors

The two cross cutting themes of Human Factors and Operational Practice will be picked up across all the above areas.

Preparation for the exam

- The exam tests the application of knowledge, reading alone is unlikely to be sufficient preparation. It is expected that candidates sitting the exam will already have experience of working in the Urgent Care environment and that preparation for this diploma will focus on looking at the syllabus and identifying gaps in their experience and addressing these. It is suggested that a variety of methods may be required. Including discussion with others planning to sit this exam or who are experienced Urgent Care clinicians. Successful candidates have specifically recommended this approach. A suggested approach is to identify areas where you feel development is required and use some of the resources outlined below. These could include books or journals, on-line resources or contact with individuals or organisations relevant to your preparation.

In preparing for the exam it is important to consider that this is intended to be an exam for experienced urgent care practitioners to evidence their professional development as such it is expected that candidates will be able to demonstrate an ability to support colleagues to deal with less common situations, complex issues and emergency situations.

The exam questions are therefore aimed at :-

- Expanding knowledge
- Understanding Integrated Care
- Knowledge of all the components of the urgent care provision
- Knowledge to support less experienced colleagues. for example :-
the management of emergencies
Intercurrent illness in patients with chronic disease
- Serious but uncommon conditions e.g. Kawasaki's disease, decompression sickness.
- Living wills, capacity, safeguarding, female genital mutilation, mental health legislation

Regarding the management of emergencies. It is worth considering what emergencies can occur in any clinical system of the body (Cardiovascular, Respiratory, gastrointestinal etc). Most of these will have national guidelines on their management from sources such as the Resuscitation Council, The British Thoracic Society, National Institute for Health and Care Excellence. You are strongly advised to be familiar with such guidance.

National Variation

The arrangements for healthcare provision and legal issues such as capacity and mental health legislation differ between countries in the UK. For clarity we will not ask

- Not to ask SBAs on legal issues that differ, in different countries of the UK, for example capacity, mental health, living wills, underage contraception.
- Opportunities to demonstrate knowledge of legal issues may arise in the SOQs where examiners can take account of national differences.
- The reading list may reference documents relevant to single country. ***Purely as examples of good practice.***

Study Resources

These include: -

- Standard texts
- On-line resources
- Spending time with colleagues who work in specific areas identified in the syllabus (e.g. injuries, call centres).

As an example previous candidates spent time with:-

- An Accident and Emergency clinician as they felt they lacked experience in dealing with injuries
- An NHS 111 call centre to achieve an understanding of how this functions

For some themes of the syllabus spending time with colleagues/ other providers of care will be a much more effective method of preparation than reading.

Essential Reading List –Theme by Theme

Working in Urgent Medical Systems

You need to understand how urgent care is accessed, the resources available and how systems decide on the best resource to meet the patients needs. You need to know about the other health and social care professionals we work alongside, so read about their training, skill sets and regulatory bodies. Think about how other services operate, their structures and what medical and social care capabilities they have.

Think about how patients access the various types of urgent care provision provided in the UK. Services other than just Emergency Departments, the Ambulance Service and Urgent Care organisations. An awareness of these services, how to access these and the criteria for access is expected.

<https://www.nhs.uk/using-the-nhs/nhs-services/urgent-and-emergency-care/nhs-111/>

<https://www.cqc.org.uk/publications/major-report/state-care-urgent-primary-care-services>

<https://www.england.nhs.uk/urgent-emergency-care/nhs-111/integrated-urgent-care-nhs-111-workforce-blueprint/>

<https://www.england.nhs.uk/urgent-emergency-care/about-uec/>

<https://www.england.nhs.uk/urgent-emergency-care/improving-ambulance-services/arp/>

<https://www.england.nhs.uk/urgent-emergency-care/urgent-treatment-centres/>

<https://www.england.nhs.uk/publication/delivery-plan-for-recovering-urgent-and-emergency-care-services/>

<https://www.england.nhs.uk/long-read/integrated-urgent-care-key-performance-indicators-2023-24/>

<https://aace.org.uk/wp-content/uploads/2019/08/safetly-reduce-avoidable-conveyance-v2.0.pdf>

<https://www.gov.scot/policies/healthcare-standards/unscheduled-care/>

<https://www.nhsinform.scot/care-support-and-rights/nhs-services/pharmacy/nhs-pharmacy-first-scotland>

<https://healthmedia.blog.gov.uk/2024/02/01/pharmacy-first-what-you-need-to-know/>

https://www.gov.wales/sites/default/files/publications/2024-01/A%20New%20Prescription_One%20Year%20On.pdf

Practising Urgent Medical Care

This theme covers the clinical knowledge expected by candidates. It is anticipated that most candidates will have extensive clinical knowledge but they may wish to refer to the syllabus. It is expected that candidates will have knowledge of how to provide immediate management of life threatening emergencies in adults and children. Candidates should consider what life threatening situations could occur in the different systems of the body and ensure they can answer questions on the immediate management of these. Guidelines for such situations are published by organisations such as the Resuscitation Council, The British Thoracic Society, NICE.

Sources of guidance include

NICE Guidelines

<https://www.nice.org.uk/guidance>

NICE Clinical Knowledge Summaries

<https://www.nice.org.uk/cks-uk-only>

SIGN [https://www.sign.ac.uk/our-](https://www.sign.ac.uk/our-guidelines/)

[guidelines/](https://www.sign.ac.uk/our-guidelines/)

BTS Guidelines

<https://www.brit-thoracic.org.uk/quality-improvement/guidelines/>

NHS Choices

<https://www.nhs.uk/conditions>

Resuscitation Council Guidelines

[2021 Resuscitation Guidelines | Resuscitation Council](#)

[UK](#)

Scottish Palliative Care Guidelines

<https://www.palliativecareguidelines.scot.nhs.uk/>

Sepsis

<https://elearning.rcgp.org.uk/mod/book/tool/print/index.php?id=12896#ch544>

<https://www.nice.org.uk/guidance/ng51>

<https://www.nice.org.uk/guidance/ng143>

[Alder Hay Hospital – Fever without a focus chart – see Appendix 2](#)

Safeguarding

<https://elearning.rcgp.org.uk/mod/book/view.php?id=12531>

www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2

GMC decision Making and Consent

https://www.gmc-uk.org/-/media/documents/updated-decision-making-and-consent-guidance-english-09_11_20_pdf-

[Making decisions for someone else - Social care and support guide - NHS \(www.nhs.uk\)](#)

<https://www.nhs.uk/conditions/social-care-and-support-guide/making-decisions-for-someone-else/>

[https://www.macmillan.org.uk/cancer-information-and-support/treatment/if-you-have-an-advanced-cancer/advance-care-planning/advance-directive#:~:text=In%20Scotland%2C%20an%20advance%20directive%20\(or%20living%20will\)%20is,do%20not%20have%20mental%20capacity\).](https://www.macmillan.org.uk/cancer-information-and-support/treatment/if-you-have-an-advanced-cancer/advance-care-planning/advance-directive#:~:text=In%20Scotland%2C%20an%20advance%20directive%20(or%20living%20will)%20is,do%20not%20have%20mental%20capacity).)

Using Technology in Urgent Care

This theme covers the introduction of technology into urgent care and the use of technology in Urgent Care and the guidance that exists to ensure safety and ethical issues are considered.

This is the section where remote consultation development may be examined.

GMC Remote Consultations Guidance

<https://www.gmc-uk.org/ethical-guidance/ethical-hub/remote-consultations>

<https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/prescribing-and-managing-medicines-and-devices> (Read only section on remote prescribing)

<https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/08/C0638-nhs-vc-nhs-staff-quick-guide-a4.pdf>

NHS England and RCGP Guidance

<https://elearning.rcgp.org.uk/mod/page/view.php?id=10558https://www.england.nhs.uk/five-year-forward-view/next-steps-on-the-nhs-five-year-forward-view/harnessing-technology-and-innovation/>

<https://www.england.nhs.uk/five-year-forward-view/next-steps-on-the-nhs-five-year-forward-view/harnessing-technology-and-innovation/>

<https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/C0479-principles-of-safe-video-consulting-in-general-practice-updated-29-may.pdf>

https://www.cqc.org.uk/sites/default/files/20170303_pms-digital-healthcare_regulatory-guidance.pdf

<https://www.goodsamapp.org/> - now being used by some Urgent Care providers for consultations with Consultants.

NHS Technology resources

<https://digital.nhs.uk> (Search Urgent Care to assess services that could be used to help Urgent Care Providers.)

<https://digital.nhs.uk/services/repeat-caller-service>

Managing Safe Dispositions

This theme covers making safe and appropriate decisions about the best management for the patient after they have been examined, assessed and a decision made as to the best management. This requires consideration of choice of service provision most appropriate to provide this management and make best use of services available to clinicians and the patient.

https://www.kingsfund.org.uk/sites/default/files/Avoiding-Hospital-Admissions-Sarah-Purdy-December2010_0.pdf

<https://www.local.gov.uk/our-support/partners-care-and-health/care-and-health-improvement/working-hospitals/reducing-preventable-admissions>

<https://www.gov.uk/government/publications/domestic-abuse-a-resource-for-health-professionals>
(Section 4 only)

<https://sjtrem.biomedcentral.com/articles/10.1186/s13049-017-0409-6>
<https://www.tandfonline.com/doi/full/10.1080/10903127.2018.1549628>
<https://www.ncbi.nlm.nih.gov/books/NBK506843/>

<https://www.rcpjournals.org/content/clinmedicine/16/4/343>

<https://www.kingsfund.org.uk/sites/default/files/Diagnosis%20and%20referral.pdf>

<https://www.gov.uk/government/publications/safeguarding-policy-protecting-vulnerable-adults>

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#safeguarding-1>

<https://www.nhs.uk/conditions/female-genital-mutilation-fgm/>

<https://www.gov.uk/topic/schools-colleges-childrens-services/safeguarding-children>

Risk Management

<https://www.rcp.ac.uk/projects/outputs/national-early-warning-score-news-2>

<https://news.ocbmedia.com/>

<https://www.cqc.org.uk/publications/themed-work/briefing-learning-serious-incidents-nhs-acute-hospitals>

<https://emj.bmj.com/content/36/5/287.full>

[National Early Warning Score \(NEWS\): Supporting clinical judgement and patient safety on Vimeo](#)

Urgent Care Preparedness

Risk Registers – These do not need to be known but general knowledge of their existence and content is expected. The following are only identified as examples you may wish to look for a register more appropriate for your area.

https://assets.publishing.service.gov.uk/media/64ca1dfe19f5622669f3c1b1/2023_NATIONAL_RISK_REGISTER_NRR.pdf

<https://www.southwaleslrf.co.uk/media/ib5as4mn/swlrf-risk-register-2022-version-14-public.pdf>

<https://www.firescotland.gov.uk/your-area/community-risk-register/>

Other documents for Urgent care Preparedness

<https://www.jesip.org.uk/about-jesip/>

<https://www.gov.uk/government/publications/cold-weather-plan-cwp-for-england>

Tuckey, Michelle R and Scott, Jill E (2014) 'Group critical incident stress debriefing with emergency services personnel: a randomized controlled trial', *Anxiety, Stress & Coping*. Routledge, 27(1), pp. 38–54. doi: 10.1080/10615806.2013.809421

Operational Practice

<https://www.rcplondon.ac.uk/guidelines-policy/rebuilding-nhs-improving-medical-pathways-acute-care>

<https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-medical-practice>

https://www.gmc-uk.org/-/media/documents/raising-and-acting-on-concerns-about-patient-safety---english-0617_pdf-48902813.pdf

https://www.gmc-uk.org/-/media/documents/16---guidance-on-reporting-alleged-or-suspected-criminal-conduct-to-the-police_pdf-80651272.pdf

<https://www.england.nhs.uk/urgent-emergency-care/>

<https://www.mddus.com/advice-and-support/advice-library/engaging-with-the-media>

<https://mpscduks.azureedge.net/resources/docs/mp/advice-booklets/handling-the-media-guide.pdf>

<https://www.themdu.com/guidance-and-advice/podcasts-and-videos/dealing-with-the-media>

<https://www.england.nhs.uk/publication/urgent-treatment-centres-principles-and-standards/>

Human Factors

Human Factors in Primary Care

<https://drive.google.com/file/d/0B4dbLgB56hptLUw1MG4xVDY5ZkU/view>

Human Factors in Healthcare

- <https://www.tandfonline.com/doi/full/10.1080/14739879.2016.1152658>
- <https://drive.google.com/file/d/0B4dbLgB56hptUGILbHBOU3hkNmc/view?resourcekey=0-WVZeEFs3MxAiS4KhnuAcwg>
- <https://www.rcemlearning.co.uk/foamed/human-factors/>
- Implementing Human Factors in Healthcare.
- <https://www.hse.gov.uk/humanfactors/topics/fatigue.htm>

Quality Improvement

- [Improving teams in healthcare: Resource 1 - Building effective teams | RCP London](#)
- [Improving teams in healthcare: Resource 2 - Team culture | RCP London](#)

- [Improving teams in healthcare: Resource 3 - Team communication | RCP London](#)
- [Improving teams in healthcare: Resource 4 - Team development | RCP London](#)
- <https://www.kingsfund.org.uk/insight-and-analysis/long-reads/effective-teams-general-practice>
- <https://www.leadershipacademy.nhs.uk/wp-content/uploads/2013/04/7428f23d7207f39da1eda97adbd7bf34.pdf>
- https://www.hee.nhs.uk/sites/default/files/documents/HEE_MDT_Toolkit_V1.1.pdf
- https://www.cqc.org.uk/sites/default/files/20160608_learning_from_harm_briefing_paper.pdf

Further Reading

For other sources recommended by previous candidates go to <https://fphc.rcsed.ac.uk/my-fphc/urgent-medical-care/about-the-dipumc-exam>. Please note these are only recommendations from other candidates they are not recommendations by The Faculty of Pre- Hospital Care.

Experience in the application of knowledge

could be gained by interaction with :-

Minor Illness Units

Minor Injuries Units

Walk-in centres

Homeless GP service

GP minor treatment centres

Mental Health providers (Including a visit to section 136 or equivalent if provided in your area)

999 call centres

111 call centres

Palliative care providers

Infection Control clinicians

Duty directors of Urgent care organisations

Duty Social Workers

Acute re-enablement team

Clinical information officers

Coroner

Laboratory clinicians regarding near patient testing

NHS Ambulance Services

Candidates may wish to access their own organisation's:

- Risk assessment
- Business continuity plans
- Significant event meetings
- Safeguarding policies

Sample Questions

Can be found at:-

<https://www.rcsed.ac.uk/view?id=e29ded7a-9bac-47a1-a371-0ae5eb2c9261&type=exam>

<https://www.rcsed.ac.uk/view?id=5f5effb6-02ea-4105-932c-064432dd0b08&type=exam>

Appendix 1

1 MCQ ANSWER SHEET ONE

The Royal College of Surgeons of Edinburgh

Examination: _____

Location: _____

Date of Examination: _____

Example
Candidate 0076
should be inserted as

CANDIDATE NUMBER			
0	0	7	6
0	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

MARKING INSTRUCTIONS

- This document is designed to be scanned by machine
 - Mark like this using the pencil provided
 - If you make a mistake erase it completely
 - Each question will have five options listed (A-E). Only one of the options will be the correct answer. Indicate your response by marking a single line through the appropriate box. For example:
- If question 23 correct answer is option C
- If question 24 correct answer is option E
- If question 25 correct answer is option A

23. A B C D E

24. A B C D E

25. A B C D E

6. A B C D E

7. A B C D E

8. A B C D E

9. A B C D E

10. A B C D E

11. A B C D E

12. A B C D E

13. A B C D E

14. A B C D E

15. A B C D E

16. A B C D E

17. A B C D E

18. A B C D E

19. A B C D E

20. A B C D E

21. A B C D E

22. A B C D E

23. A B C D E

24. A B C D E

25. A B C D E

26. A B C D E

27. A B C D E

28. A B C D E

29. A B C D E

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36. A B C D E

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76. A B C D E

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80. A B C D E

81. A B C D E

82. A B C D E

83. A B C D E

84. A B C D E

85. A B C D E

86. A B C D E

87. A B C D E

88. A B C D E

89. A B C D E

90. A B C D E

1

MCQ ANSWER SHEET ONE

MARKING INSTRUCTIONS

- This document is designed to be scanned by machine
- Mark like this using the pencil provided
- If you make a mistake erase it completely
- Each question will have five options listed (A-E). Only one of the options will be the correct answer. Indicate your response by marking a single line through the appropriate box. For example:

If question 23 correct answer is option C

23 A B C D E

If question 24 correct answer is option E

24 A B C D E

If question 25 correct answer is option A

25 A B C D E

The Royal College of Surgeons of Edinburgh

Examination

Location

Date of Examination

Example

Candidate 0076

should be inserted as:

CANDIDATE NUMBER

CANDIDATE NUMBER

0 0 7 6

0 0 7 6

1 1 1 1

2 2 2 2

3 3 3 3

4 4 4 4

5 5 5 5

6 6 6 6

7 7 7 7

8 8 8 8

9 9 9 9

0 0 0 0

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6 6 6 6

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8 8 8 8

9 9 9 9

Appendix 2

Insert Fever without a focus Screening Chart