

Guide to gaining capabilities in the practice of ECT

The aim of this guide is to promote understanding of ECT and the capabilities required for the practice of ECT.

The guide is intended to describe the capabilities expected of Core Trainees, Senior Trainees, Prescribing Consultants and ECT Practitioners.

Trainees are required to demonstrate their understanding of how Electro-Convulsive Therapy (ECT) and other physical treatments can be used for the treatment of mental disorders. The Guide is intended to elucidate the knowledge required within the current curricular requirements for trainees in Psychiatry. Trainees at all levels should understand the indications, contraindications, likely benefits and risks associated with ECT. They should also have an understanding of the legal aspects of ECT administration. The Guide should also be used to inform the capabilities required in the practical administration of ECT.

It is suggested that by the end of the third year of core training, trainees have attended a lecture on the Theory and Practice of ECT, for example, the lecture provided on the ECT Foundation Course run by the Royal College of Psychiatrists, or similarly comprehensive lecture. The Trainee should attend their local ECT service for the purposes of acquiring the capabilities described within the Guide. Several of the capabilities can be assessed by means of Workplace Based Assessments, as described in the Guide. The ECT lead within the local service should sign off on the capabilities, which the Trainee can then record in their portfolio, perhaps with a certificate of completion of the capabilities.

The capabilities will also be helpful for career grade psychiatrists, SAS Doctors, prescribing Consultants wishing to update their knowledge of ECT for the purposes of CPD, and for ECT Practitioners and lead Consultants to provide supporting evidence for the purposes of Appraisal.

Committee on ECT and Related Treatments

January 2021

Name:.....

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Junior trainees by year 3 ought to be capable of administering ECT without direct supervision (though in practice, clinics should always be supervised by a senior ECT practitioner). Trainees should be able to prepare patients for ECT and explain to patients and relatives the facts about ECT, its indications and broad place within modern psychiatric treatment. They ought to be able to monitor a patient's mental state and cognitive functioning during a course of ECT. **Higher trainees ought to maintain this capability until the end of year 6.**

Consultants, SAS Doctors and higher trainees by the end of year 6 ought to have an understanding of the place of ECT in modern clinical practice sufficient to obtain informed consent from patients to reach Level 1 capability. Only consultants responsible for the ECT clinic would be expected to have Level 1 capability in the practical aspects of the administration of ECT (sufficient to run an ECT clinic).

Level 1 = fully conversant (FC); Level 2 = working knowledge (WK); Level 3 = awareness (A)

Verbally assessed

1 FC = Is able to explain accurately all the important features to a standard that shows sufficient understanding that would allow them to competently and independently apply the knowledge

2 WK = Is able to explain the key features to a standard that shows sufficient understanding that would allow them to apply the knowledge in common situations and access further information if necessary

3 A = Is aware of the topic and knows where to get further information but not to a level that provides a WK

Observed

1 FC = Is able to carry out the procedure to a standard that shows sufficient skill and understanding that would allow them to competently and independently carry it out

2 WK = Is able to carry out the procedure to a standard that shows sufficient skill and understanding that would allow them to carry it out in usual situations but to know their limitations and access further help if necessary

3 A = Is aware of the topic and knows where to get further information but not to a level that provides a WK

Recommended capability:

Foundation doctors

Theory & background	awareness	1-7
Practical aspects of ECT	not required	
Other aspects of ECT practice a-c	not required	

CT1-3

Theory & background	working knowledge	1, 3-6
	Awareness	2, 7
Practical aspects of ECT	fully conversant	1-5, 7
	working knowledge	6
Other aspects of ECT practice a	1-8 required	
Other aspects of ECT practice b, c	not required	

ST4-6

Theory & background	fully conversant*	1-7
	working knowledge**	1-7
Practical aspects of ECT	fully conversant*	1-7
	working knowledge**	1-7
Other aspects of ECT practice a & c	not required	
Other aspects of ECT practice b	fully conversant*	
	not required**	

Prescribing Consultants & SAS Doctors

Theory & background	fully conversant	1-7
Practical aspects of ECT	working knowledge	1-7
Other aspects of ECT practice a-c	not required	

ECT consultants

Theory & background	fully conversant	1-7
Practical aspects of ECT	fully conversant	1-7
Other aspects of ECT practice b & c	fully conversant	

* For ST4-6 in General Adult Psychiatry and Old Age Psychiatry

** For ST4-6 in specialities other than General Adult and Old Age Psychiatry

Name:.....

1. Theory and background:

	Recommended Capability	Evidenced	Level	Date	Signature
1.	<i>NICE Guidance:</i> Demonstrate knowledge of NICE guidance relevant to ECT, including TA59 and CG90	Verbally assessed			
2.	<i>Royal College Standards:</i> Demonstrate an awareness of standards, including ECTAS and SEAN	Verbally assessed			
3.	<i>Local protocols:</i> Demonstrate a knowledge of local policies and procedures, including: Emergency ECT Outpatient ECT High-risk patients Continuation/MaintenanceECT When ECT should be discontinued Choice of bilateral or unilateral treatment	Verbally assessed			
4.	<i>Consent process:</i> Demonstrate a knowledge of the consent to treatment requirements, including MHA/MCA documentation and principles	Verbally assessed (and eg WBA miniACE)			
5.	<i>ECT process:</i> Able to describe: Indications for ECT Contraindications to ECT Benefits, risks and possible side effects of ECT, especially cognitive side effects and how monitored Demonstrate knowledge of The pre-treatment preparation which needs to be undertaken by the referring doctor The procedure for the administration of ECT	Verbally assessed			
6.	<i>Mechanisms of action:</i> Able to describe: Current theories of mechanism of action of ECT The physiological effects of ECT	Verbally assessed			
7.	<i>Related treatments:</i> Demonstrate knowledge of other neuromodulation treatments, including rTMS	Verbally assessed			

Name:.....

2. Practical aspects of ECT

	Recommended capability	Evidenced	Level	Date	Signature
1.	<i>Clinic protocol:</i> a. Understand the clinic stimulus dosing protocol b. Understand when to restimulate c. Know how to manage a prolonged seizure	Verbally assessed			
2.	<i>Using the ECT machine:</i> Able to: a. Attach the EEG leads b. Apply electrodes bilaterally c. Apply electrodes unilaterally d. Test impedance	Observed (could be assessed by WBA eg DOPS)			
3.	<i>Delivering the dose:</i> Able to set and adjust the dose	Observed			
4.	<i>Monitoring:</i> Able to: a. Observe and assess motor seizure b. Observe and end recording of EEG seizure c. Interpret the EEG	Observed			
5.	<i>Recording:</i> Able to correctly record the treatment details in the patient record	Observed			
6.	Has knowledge of anaesthetics and muscle relaxants used in ECT	Verbally assessed			
7.	Is up-to-date with basic resuscitation training (within the last year)	Written			

Name:.....

3. Other aspects of ECT practice

a)

	Recommended capability	Evidenced	Date	Signature
1.	Has attended ECT induction			
2.	Observed clinical application of ECT	Observed		
3.	Supervised clinical application 1	Observed		
4.	Supervised clinical application 2	Observed		
5.	Supervised clinical application 3	Observed		
6.	Supervised clinical application 4	Observed		
7.	Supervised clinical application 5	Observed		
8.	Supervised clinical application 6	Observed		

b)

	Recommended capability	Evidenced	Date	Signature
	Able to run an ECT list unsupervised	Observed		

c)

	Recommended capability	Evidenced	Level	Date	Signature
1.	Participate in <i>audit</i> of ECT	Audit reports			
2.	Participate in one day of <i>CPD</i> relating to ECT each year	CPD returns			
3.	Able to <i>advise consultant colleagues</i> on: a. Relative merits of bilateral/unilateral treatment b. Suitability of a patient for ECT c. Drug treatment during ECT d. Management of side effects during ECT	Practice			
4.	Is involved in <i>regular review</i> of policies and procedures in the ECT clinic	Practice			
5.	Can provide evidence of <i>training and supervising</i> doctors in training in ECT practice	Practice			
6.	Leads or takes an active role in ensuring the ECT clinic is accredited by ECTAS	ECTAS certificate			
7.	Has a working knowledge of the ECT handbook	CPD			

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