

## ACSA portal - Quick start guide

Please note all screenshots used in this guide are taken from our testing site and do not reflect any real departments.

The portal can be accessed at: <https://acsa.rcoa.ac.uk/>. It is suggested to access the portal using Google Chrome; we are aware of some issues with using Internet Explorer.

1. Click the 'Register' button in the top right of the page.
2. Fill in all required (\*) fields in the form:

- Select NHS or independent organisation;

Once you have selected this, a new option will appear below: either 'Trust/board' for NHS organisations, or 'organisation' for independent.

The Trust/Board name is selected from a pre-set list, which comes from the CQC, HIS, HIW and HSC websites.

- Fill in details of the ACSA lead;
- Fill in details of the clinical director;
- Create a secure password for your account;
- Fill in details of the hospitals to be accredited by ACSA;

If your trust or board has multiple hospitals/sites, you will need to decide whether you would like to seek accreditation for just one or more of your hospitals.

If you decide to seek joint accreditation of more than one hospital, please add details of each hospital separately; once you have filled out the requested information for the first site and selected 'create new hospital', it will then bring up the option to 'add new hospital' as required.

The details requested for each hospital department that you are seeking accreditation for includes number of beds, theatres, and consultants in the department and the services provided. This can all be edited later.

You will also need to choose if you want to apply for accreditation against the domain 5 standards (neuroanaesthesia, ophthalmic anaesthesia, vascular anaesthesia and/or Cardiothoracic anaesthesia). You can email the ACSA team at [acsa@rcoa.ac.uk](mailto:acsa@rcoa.ac.uk) if you are unsure if you should apply for domain 5 accreditation.

- Add in the additional information;

-Other forms of peer review the department participates in  
- Other information relevant to your registration

3. Press 'Submit registration form' when you have completed all the required fields. You can edit the information in this form later (Except hospital name).

A member of the ACSA team will have to approve your registration before you can begin filling in your self-assessment. If you haven't been approved within three

working days, please contact the ACSA team at [ACSA@rcoa.ac.uk](mailto:ACSA@rcoa.ac.uk). Please note that the ACSA team is only available during office hours, Mon-Fri.

You will get a confirmation email when your registration has been approved by the ACSA team. Once you have received this, you can log in to your account using the password you set previously and your email address.

## Your Dashboard

Your dashboard will look something like the one below for our test department, Fitzpatrick Referrals.

**RCOA** | **ACSA**  
Royal College of Anaesthetists | Anaesthesia Clinical Services Accreditation

Dashboard   Self assessment tracker   Department details   Account   Logout

### Fitzpatrick Referrals - Your overall progress

96.4% Met
1.2% In progress
1.2% Not met
0.8% N/A
0.4% Not yet rated

[See all standards](#)

<b>Your College guide is</b> Dr Hannah Moore Consultant anaesthetist at ABC NHS Trust <a href="#">Click here to email them</a>	<b>Review date</b> Your upcoming review date is scheduled for two consecutive days starting <b>29/10/2021</b> <a href="#">Last cycle report 2016</a>	<b>Next payment invoice due</b> Please ensure you have provided a purchase order in advance of this date <b>29/07/2020</b> <a href="#">Contact the finance team here</a>
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From the dashboard you can see a summary of the progress against the current ACSA standards, based on the information you have input to the self-assessment tracker. You can also see key information such as your college guide and the date of your next visit.

From here you can also access the self-assessment tracker, your department details, and your account details.

## Editing your/your department's details

**To edit your own details**, click the 'Account' tab from your dashboard. Here you will be able to change your name, email address and password. You can also set yourself a role name, for example: ACSA lead, clinical director, ACSA reviewer.

Always remember to click save before navigating away from this page.

**To edit your department's details**, please ask the ACSA team to make the changes you need by emailing [ACSA@RCOA.ac.uk](mailto:ACSA@RCOA.ac.uk)

## Inviting other department team members

You can invite other members of your team to access the portal. It is a good idea to make sure more than one person has a login to the portal, in case the ACSA lead is not able to log in, as well as to share the work of uploading documentation. Team members are able to make changes to the self-assessment including changing the RAG rating, uploading evidence and editing comments.

To invite a new member, the ACSA lead should go to 'department details' in your menu bar and scroll down to the very bottom of the page. You will be able to see the current team members which may include your college guide, reviewers and ACSA administrator. Click the pink 'Invite' button at the bottom. This will lead to a page asking for the name and email address of the new member, and you can add an optional message. Only the lead is able to invite additional members to the team.

Department Team Members		
Name	Role	Status
Daisy Dean		Approved
Hannah College-guide	College guide	Approved
Hannah Moore		Approved
Ruth Nichols	ACSA Administrator	Approved

[Invite](#)

The person you have invited will receive an email with a link to set up their password and access the portal themselves.

## The self-assessment tracker

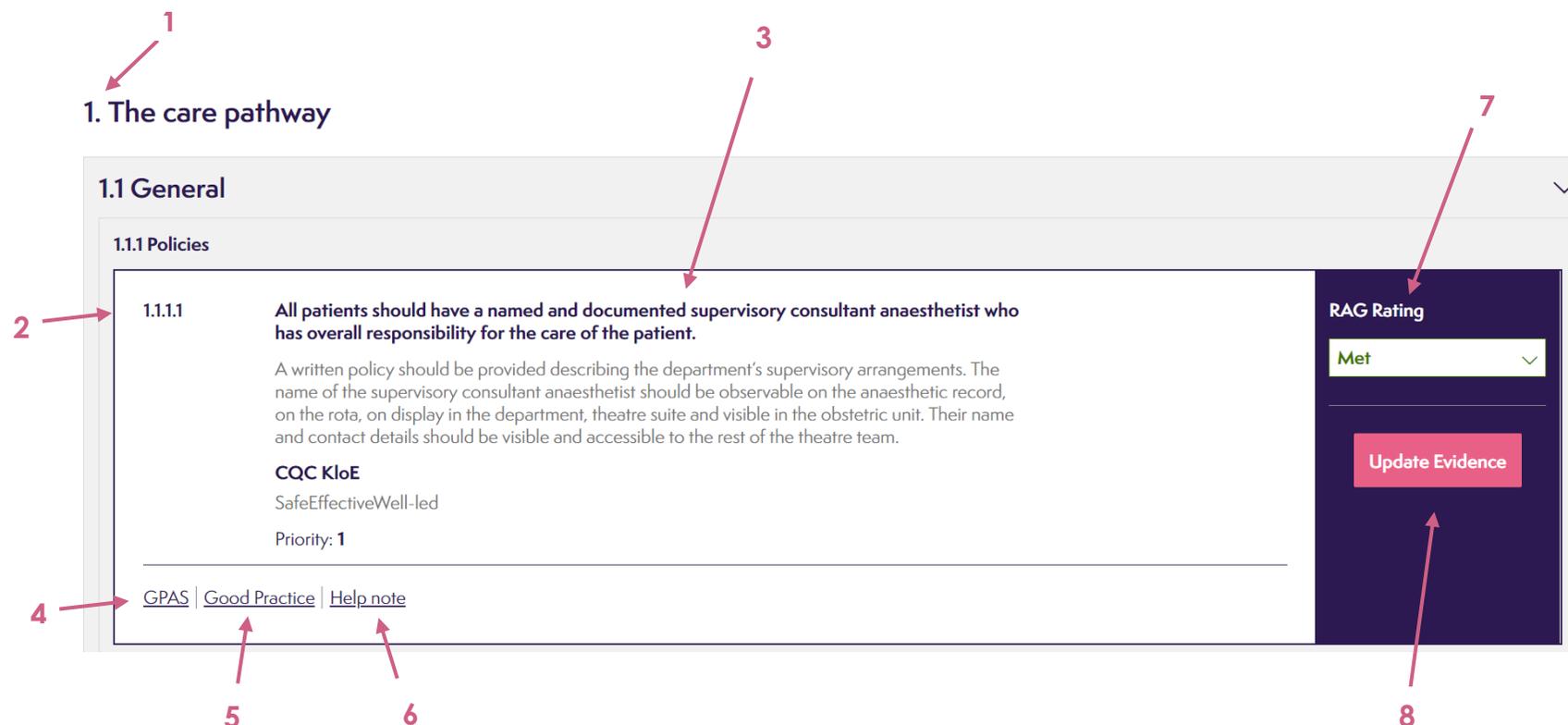
The self-assessment tracker is for you to complete either pre-visit, or for your annual compliance. You should keep this up to date whenever possible.

This tracker contains all the information you should need about each standard, including its full wording, priority, relevant GPAS references, and help notes. For each standard, you can give your own RAG rating, and upload and view evidence.

Use the arrows on the right-hand side to expand the subdomains:

<b>1. The care pathway</b>	
1.1 General	⌵
1.2 Before the procedure	⌵
1.3 On the day of the procedure	⌵

The diagram below explains your options for each standard:



**1. The domain, subdomain and area**

**2. The standard number**

**3. The standard.** Each standard is a statement which warrants a 'yes' or 'no' i.e. 'met' or 'not met' response. The text underneath the statement describes the evidence required to determine whether the standard is met. There is also information about the standard priority (1, 2 or 3), and the related domain from the relevant regulator in your region.

**4. The GPAS references.** All standards have one or more references to the GPAS document. Clicking this will bring up a side bar of the related references.

**5. Good Practice Library.** Click this link to bring up the GPL sidebar to view good practice examples relating to this standard.

**6. Help note.** This is additional wording produced to clarify the standard. Clicking here brings the help note for this standard up in a sidebar.

**7. RAG rating.** Click the arrow to open the dropdown selection of ratings.

**8. Update evidence.** Clicking this button brings up the sidebar for evidence. You can upload new evidence, or view and remove previously uploaded evidence.

## RAG rating

In addition to the ratings 'met' or 'not met', the following ratings are available for selection:

- 'In Progress'- this rating is available to assist your department with conducting gap analysis and in seeing how close you are in being ready for review. When you are ready to submit your ratings for an accreditation review or compliance, please ensure you make a judgement on whether the standard is either 'met', 'not met' or 'N/A,' as from an assessment point of view these are the only ratings we can accept.
- 'N/A'- not applicable. You may find that some of the standards are not applicable to you and the services you deliver. Where this is the case, you can mark a standard as N/A. The ACSA review team may still ask about standards that you mark as N/A if they are unsure about why you have deemed them 'not applicable'

## The Good Practice Library (GPL)

The ACSA team has collated this library with examples of good practice from previously visited departments, when the review team felt a department had met a standard particularly well. This can include examples of good policies, leaflets or case studies. These are freely accessible, and you may want to use them to generate some ideas for how your own department could meet the standard.

On the portal, if you want to see what is available for a particular standard, you can access the GPL by scrolling to the standard in your self-assessment tool. Click the 'good practice' link at the bottom of the standards, and a sidebar like the one pictured below will open on the right of your screen. Documents relating to the standard you have picked will be linked in a list for you to download.

The screenshot shows a sidebar titled 'Good Practice Library' with a '< back' button at the top left. The sidebar contains a list of documents for standard 1.2.1.4. The first document is '1.2.1.4 Adult-pre-operative fasting guidelines for elective surgery - Frimley' with a link to a PDF file. The second document is '1.2.1.4 Antacid prophylaxis in obstetric patients - Frimley' with a link to a DOCX file. The third document is '1.2.1.4 Blood transfusion policy for adults - Frimley' with a link to a PDF file. The fourth document is '1.2.1.4 Diabetes management in adults -'. The main content area on the left shows the details for standard 1.2.1.4, including the title, description, and CQC KIoE rating.

<p>1.2.1.4 <b>There are agreed local policies for preoperative preparation of patients. Examples include fasting, investigations, cross match, thromboprophylaxis, diabetes, latex allergy, antacid prophylaxis and enhanced recovery after surgery (ERAS).</b></p> <p>A copy of the policy/policies should be provided and staff should give verbal confirmation that they are fit for purpose and followed. In children, similar policies should be provided including fasting pregnancy testing in adolescents.</p> <p><b>CQC KIoE</b> SafeEffective Priority: 1</p> <p><a href="#">GPAS</a>   <a href="#">Good Practice</a>   <a href="#">Help note</a></p>	<p>&lt; back</p> <p><b>Good Practice Library</b></p> <p><b>1.2.1.4 Adult-pre-operative fasting guidelines for elective surgery - Frimley</b></p> <p><a href="#">1.2.1.4 Adult-pre-operative-fasting-guidelines-for-elective-surgery (Frimley_review Nov 2021).pdf</a></p> <p><b>1.2.1.4 Antacid prophylaxis in obstetric patients - Frimley</b></p> <p><a href="#">1.2.1.4 Antacid-prophylaxis-in-obstetric-patients (Frimley_review Sept 2019).docx</a></p> <p><b>1.2.1.4 Blood transfusion policy for adults - Frimley</b></p> <p><a href="#">1.2.1.4 Blood transfusion policy for adults (Frimley_review June 2020).pdf</a></p> <p><b>1.2.1.4 Diabetes management in adults -</b></p>
<p>1.2.1.5 <b>A process is in place to ensure that abnormal results of pertinent investigations are flagged to the relevant person within a clinically appropriate timeframe.</b></p> <p>Verbal or written confirmation that test results reach the right person should be provided as well as confirmation that staff are satisfied that information can be found if it is looked for. Staff should be able to describe a system by which lists can be amended or planned days and/or weeks before based on the results of investigations.</p> <p><b>CQC KIoE</b> Safe</p>	

## Updating evidence

For some standards you will be asked to submit evidence against them. Examples of evidence includes policies, guidelines, patient leaflets, audit data or staff rotas, as specified in the standard wording. To do this, press the pink 'update evidence' button to bring up the sidebar. This will display any previously uploaded evidence which you can view and delete, and you can also upload new evidence.

Please note that only certain file formats are accepted by the portal – docx, pdf, ppt, xls, xlsx, png, jpg & jpeg. If you are having trouble uploading and saving your evidence, please check what format it is in. There is also a file size limit of 256MB. If you still experience problems, try shortening the length of the title of the document.

The evidence uploaded will be visible to others who are associated with your department – other staff members, your college guide, the review team and the RCoA administrators.

## Filtering the self-assessment

When completing the self-assessment, you may want to filter out some standards to help you. There are several filters you can apply for the self-assessment tool will only show you standards which:

- Have a particular rating (met, not met, not yet rated, in progress, N/A);
- Have a particular reviewer's rating (met, not met, not yet rated);
- Have a particular priority (1,2 or 3);
- Selected or not selected as classroom standards.

## Reporting a problem with the portal

If you encounter any issues with the portal please do let the team know by emailing [ACSA@rcoa.ac.uk](mailto:ACSA@rcoa.ac.uk) and let us know as much detail as you can about your issue (any error messages you see, what you were trying to do, what browser you are using and if you are accessing it from your hospital).