ACE-2
USER GUIDE

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ACE-2: A SYSTEM FOR AUDITING CLINICAL PSYCHOLOGY TRAINEE NHS CLINICAL EXPERIENCE

Overview:

ACE2 – Audit of Clinical Experience - is an Internet-based system enabling trainees to log and rapidly review details of their client and other work on placements for personal review and for purposes of mid- and end-of-placement reviews (MPRs and EPRs, respectively).

ACE2 is the updated version of ACE. Version 2, a revised and extended version of ACE, was introduced after August 2013. The new features are described in Appendices but the basic operations of ACE2 and much of the content remains the same. Like its predecessor, ACE2 will enable both Trainees and Courses to identify placement and training needs. The system produces all the reports and charts needed for such purposes and to help ensure that Trainee clinical experiences meet HCPC Statement of Proficiency and BPS accreditation and other requirements.

Use of the system requires accesses the Internet through a standard browser such as Internet Explorer ™. Entry to the site is via a special web address – the ACE Portal (URL in the usual http:// format). The user needs a personal user name ID, password, and PIN to log onto the system and a special code for identifying clients. These are provided by the Course.

ACE2 allows creation of new client records, editing and deleting client data and the production of reports and charts, all of which can be printed. In addition to demographic and clinical data, ACE can log Personal Learning experiences, Inter-professional Learning and Competences and other information. All pertinent reports and charts can also be viewed on-line by Course Tutors, enabling them to prepare in advance for placement and other reviews.

The system conforms to guidelines in Confidentiality: NHS Code of Practice Department of Health, (2003). The appearance and functionality of ACE2 was revised from the previous version of ACE that was developed following advice from the then Caldicott Guardian of the NHS Information Authority and advisers in the Department of Health responsible for Caldicott and Data Protection Act matters. ACE2 has retained the procedures for managing the data security and integrity in accordance with NHS Caldicott principles and the requirements of the Data Protection Act. The system also received the approval from a number of Heads of Psychology Services.

Supervisor approval for use of the system on placement is required. Likewise, specific service-user approval for the use of ACE-2 may be required, unless Supervisors accept that ACE-2 is covered by Trust or other procedures relating to electronic record management. Trainees can demonstrate ACE to supervisors as test records can be deleted at any time. Supervisors may wish to consult with their local Caldicott Guardian for guidance. Copies of this Manual may be reproduced for this purpose.

ACE uses a physically and electronically secure links (https) to a server (computer) based at Royal Holloway, University of London, to record, store, and process the information. Client details held on the system are pseudonymised (given a form of identification that only supervisor and trainee can decipher), and key data are encrypted (stored in a high security code) to NHS recognised standards.
ACE is designed to meet the requirements of the 2018 General Data Protection Act and NHS policies regarding openness with clients about personal data held on computers. Users of ACE must ensure informed consent from clients. Clients must also be informed of their rights to refuse creation of a record or deletion of existing records at any time, without prejudice to their treatment. They can also request a copy of their data at any time together with a copy of the coding system to enable interpretation of their record. Detailed statements of GDPR compliance and dealing with consent to create a record are provided in the ACE-2 Portal. The key change concerns the arrangements for logging service user consent, detailed in the Help section of the Portal.

All data entered in ACE can be modified at any time.

There is a daily secure back-up of records.

The entire file of information relating to a particular cohort must be deleted when all have completed the Course. This is the responsibility of the Course. A data file for the Cohort without service-user identifying detail can be created and stored beforehand.

The ACE developer welcomes suggestions for improvement from courses, trainees, supervisors and service managers.

**New Users:**
After familiarising yourself with ACE2, ensure you are aware of the specific requirements for the use of ACE2 for your Course: not all of the ACE2 data or options are required by every course and your Course should detail the information and reports required. However, ACE2 can be used for capturing and processing other information you may find useful even though not required by your Course.

You can get a sense of the ACE-2 screens in Appendix 3. However, the best way to get to understand ACE-2 is to enter one or more clients – real or imaginary. These trial runs then be deleted or the contents changed at any time.

**This User Guide**
This Guide is intended to meet the needs of all users. Because of some variation in course requirements, not all parts of the guide will be relevant to all users. Where this is the case, it will be noted in the text. The following are the main current differences:

**UEA:** Two variations for ACE2 users
Problem types 1, 2 & 3 entered as free text
Number of sessions entered as single number rather than range.

**Royal Holloway**
Update Screen Supplementary Information to be completed.
Competences entered via New Competence screen

Other course may opt to use these screens.

**ACE2, Smartphones and Tablets**
These devices are now widely available with Internet access. This means that ACE2 is potentially available through these devices. It is of critical importance that users remember
that ACE2 contains confidential clinical information and that accessing this in public or semi-public places, using unknown networks (e.g. free Wi-Fi) or allowing use by anyone other than registered users is unethical and professionally inappropriate. Avoid accessing ACE-2 in any public place, particularly over wireless connections, even with the improved security, because log-on keystrokes and screen content may be visible to others.

Courses will be asked to consider action against any trainee who compromises or breaches confidentiality.

It is also important that, because browsing history can be retained in one form or another on devices, all computers, smartphones and pad/tablet computers should be password protected to prevent unauthorised access if these are used to access ACE2. Finally, because it is possible to delete records from within ACE2, users should ensure that their login details are securely stored and are not disclosed to anyone else. A record of these details is held by the course should they be forgotten.

**Security**

When accessing ACE-2 for the first time trainees are required to enter their first name and surname. This information will be used to automatically label reports and charts.

Key data in ACE2 are encrypted to a high level and pseudonymised, protecting confidentiality in the event of unauthorised access. ACE-2 now uses secure reciprocal data transfer between computer and main database. The server holding the data is regularly backed-up to protect the information.

To enhance security, if ACE-2 is not used for five minutes, it will automatically log-out, with the loss of any unsaved changes.

**Why use ACE2?**

ACE2 supports key training requirements by providing a system for trainees to record, in the form of a computerised log, information about their client- and placement-related activities. It produces rapid, up-to-date reports and charts analysing the accumulating information, enabling trainees to review their own work at any time and courses comprehensively to assess placement progress and to support placement planning.

**Which training requirements does it facilitate?**

ACE2 was developed prior to the Health Professions Council (HPC), now the Health and Care Professions Council (HCPC), assuming prime responsibility for the registration of Clinical Psychologists and for setting the Standards of Proficiency (SoP) required of Clinical Psychologists. The SoP are structured and phrased differently to the previous BPS Committee on Training in Clinical Psychology (CTCP) Criteria for the Accreditation of Postgraduate Programmes in Clinical Psychology. However, the competences required of trainees by both the CTCP and HCPC encompass essentially the same requirements. In order to meet the various requirements, trainees will need to work with, among other things

- A range of clients
- In a range of service settings
- Reflecting the diversity of the population with
- Different service delivery systems in
- Settings oriented towards a population defined by
• Age (e.g. child, adult, older people)
• Ethnicity
• Varying complexity and levels of challenging behaviours
• Special needs (e.g. learning disabilities, serious mental health problems, health-related problems, substance abuse) or
• With different service delivery foci (e.g. psychological therapy) and a
• Range of service contexts (primary, secondary and tertiary care, in-patient, out-patient, community), using
• At least two therapeutic models
• Encompassing independently organised work, integrated inter-professional working and working in multi-disciplinary provision

(Based on Sections 2.4 and 2.6 of the Revised Competence Criteria issued by CTCP 2007.)

The experiences gained during supervised placements forms a major part of the SoP Section 3a requirements. Virtually all the placement information necessary to meet the Section 3a requirements is captured in ACE2. Additionally, trainees can now log in ACE2 those Competences and Standards of Proficiency they feel they have achieved.

Using ACE2 - what is needed?
• Access to the Internet through a fixed or mobile computer including tablet computers
• A browser set to allow pop-ups
• Attached to a printer if paper copies of reports / charts are required
• A Username, Password and PIN allocated by the training course
• A two-digit number for positioning client initials in Client ID filed to pseudonymise clients so that trainee and supervisor only know them. This number is allocated by the course
• The Internet address of the ACE2 Portal
• Permission of placement supervisor to use ACE2 with placement clients
• Informed consent of your client to enter certain details into ACE2
• Awareness of course-specific reporting requirements – for instance some courses will require logging achievement of SoP criteria.

Help using ACE-2
• The ACE-2 screens are accessed using the always-available tabbed options. Clicking any header tab produces a drop-down list of selectable options – click the sub-tab to access.
• A series of help screens identify which of the many reports to select for particular information retrieval purposes. There are lists of ACE-2 variables and which tables contain them; a second list shows the report headers with the available variables in that report (see later).
• Once into data entry screens, information about the content of the field is still available following a click on the field name.

Important Preliminary considerations – understanding forms of clinical activity
Preparation
Data are collected for several different types of activity that occur on placement. In order to ensure an accurate log, it is important to decide which of the following categories the work to be recorded in ACE2 will fall into:

- **Face-to-face work with individuals, families and other groups** - the ‘client/s’, to whom the service is provided directly. This might involve
  - Direct, face-to-face assessment, treatment, family work etc.
  - A client who has been seen face-to-face and who has *also* been worked with as a member of a group
- **Indirect work with others** (training/teaching others or organisational consultancy) to facilitate their work with the client you have also seen face-to-face
- **Observation of others** only carrying out the clinical work, for instance learning about test administration or a treatment procedure by watching a supervisor. If you observed someone and took on the client as well, this would be counted as a face-to-face client and the observational work would be entered as part of that record.
  - ACE-2 also enables trainees to log if their work was ‘observed’ and if so, who by and whether or not audio or video recordings of sessions were used in supervision.
- **Group clinical work** – providing group treatment of some kind such as anxiety or anger management, but where none of the participants has been seen by you for prior work (e.g. assessment of suitability for group treatment). If there had been prior assessment, each client so seen would count as a face-to-face (type A) client.
- **Service / research related activities** - *without* face-to-face individual client contact. May involve work with others (training/teaching others or organisational consultancy) to facilitate their work – for instance training residential home staff to introduce behaviour management programmes or dealing with ‘higher order’ issues such as service organisation or management structure, staff-support, project work, audit or research.

Everything recorded in ACE2 can be changed at any time and any record can be deleted. (All deletions are permanent.) The only fixed items for trainee course record purposes are printed outputs from ACE2 signed by the trainee and countersigned and dated by the Supervisor.

ACE2 also collects information about

- **Learning points that arise from work** – free text trainee reflections on clinical activity with a client primarily for personal use
- **Inter-professional learning experiences** – free text descriptions in addition to co-working data
- **Competences and/or Standards of Proficiency attained and exemplified** by a piece of clinical or Service-related activity.

While not all Courses implement all options, these facilities for self-monitoring can be used by any trainee who wishes.

ACE2 further allows the specific Trust or service site to be recorded, at the discretion of the course. ACE2 only records numerical codes (1, 2, 3, etc.) assigned by the course and are specific to the course.

Decide which type of work is to be entered
A. Face-to-face contact with or without Indirect Work / Groups

| Direct, face-to-face only | Use 6 letter identifier |

This involves an identified individual client worked with by you. This work may have also involved working with the client in a family group or for providing advice to others about management.

- Set up a client identifier (Client ID). This is 6-letter code lower-case alphabetic code. The client’s two initials are to be in the position allocated for your clients according to the code you were given. The user provides four other random letters. If allocated 45 (4th and 5th positions in the six letter sequence), the client Mary Jones might have axpmj, the letters apart from mj being random.

Even if a couple or family was the ‘client’, one person is used as the identifier for that piece of work, the other facts (family etc.) being captured by other means in the ACE2 record.

<table>
<thead>
<tr>
<th>Direct, face-to-face plus Indirect</th>
<th>Use 6 letter identifier</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct, face-to-face, client also in group</td>
<td>Use 6 letter identifier</td>
</tr>
</tbody>
</table>

- Complete the NEW RECORD entry screen inserting axpmj in the Client ID box.
- Complete the Client Indirect and/or Group details if Mary Jones was also in a group you ran and/or you carried out indirect work in relation to her specifically.

B. Observation of others.

| Observe work with client | obsera, obserb etc. |

The face-to-face contact with the individual client occurs incidentally because someone else is doing the clinical work and you are there primarily to observe.

- Use obsera in the ‘Client ID’ field of the NEW screen for the first instance, obserb for second instance etc.
- Fill in other sections of the NEW screen as appropriate. It is best to give each instance a unique Client ID across placements: use the next available letter rather than start from the beginning of the alphabet for each new placement: e.g. Placement 1 – obsera, obserb, obserc; Placement 2: obserd, obsere etc.
- This approach should be adopted for other special codes (see below).

C. Group work with no prior individual face-to-face (e.g. no individual pre-assessment).

| Group only (no other work) | groupa, groupb etc. |

Use groupa in the ‘Client ID’ field of the NEW screen for the first instance, groupb for second etc. and complete relevant group sections.
D. Service / research related activities

| Service / research related | servea, serveb, etc. |

Use servea in the ‘Client ID’ field of the NEW screen for first instance, serveb for second etc. and select type from Service Related drop-down list.

E. Clients who refuse consent for an ACE2 record.

| Client requests deletion or no consent for record | nocona, noconb etc. |

Some clients, either before or after the episode may request no personal record is set up in ACE2 or that the existing record is deleted, respectively. ACE2 allows the entry of a user ID code, known only to the trainee (nocona- see below) with minimal data items to act as a reminder who the client is.

These should be coded as nocona, noconb – see later

NOTE
DO NOT use group, obser, serve or nocon as the first 5 letters for the Client ID for face-to-face clients as these codes are treated differently in the reports.

Only use the prescribed prefixes for the categories. Failure to do so will result in incorrect reports.

F. Learning Points
Enter any free-text personal notes about important learning experiences arising from your work with the client. Need not be entered for every client.

G. Inter-professional Learning
Enter any free text describing joint learning with other professionals in relation to this client.

H. Competences / Standards of Proficiency
These sections allow the highlighting of competences or standards demonstrated working with this client
- To enter data in the Competence/Standards screens you need first to have created a record in the NEW screen.
- Go to the UPDATE screen and select the placement number and client
- Click the Get data link
- This will populate the Update screen.

For the original Competences screen
- Click on the Competence Bar

For the New Competences screen
- Click on the NEW Competence Bar
- Follow the instructions given when the Competence / New Competence Screen Help button is clicked.
- Make sure to click the Save and return button.
- A similar procedure is followed for Standards of Proficiency.
None of the information recorded in F, G or H is made available if a client requests a copy of their ACE2 record (see later) as this information is personal to the trainee.

**Updating or Modifying Data entered originally via the NEW Screen**
- Go to the UPDATE screen and select the placement number and client
- A box with client information will appear
- Click the Get data link
- Click the Edit link on the right
- This will populate the screen.
- Modify and add data as required
- Click Update record to save or Cancel to ignore changes

**Getting Help while in ACE**
Help screens are available in a number of different sections in ACE. Clicking the How to use button will bring this information in a pop-up screen. In addition, in the NEW and UPDATE screens, passing the cursor over a Field Name (e.g. Interventions 1) will bring up a list of the available codes and what they refer to.

A copy of this Guide is also available on-line via the Help Tab.

**Using the ‘Other’ option in the drop-down lists**
In the drop down lists, there is scope for selecting ‘Other’ if the particular item to be recorded is not listed. The current lists already incorporate suggestions from users. If the required descriptor appears to be missing, check the category codes (cursor over the field title) to make sure that the required item is not on the list. If absent, please forward details of what is needed to the author (see email address below) who will, if appropriate, arrange to update ACE2 to include the item in the list. If the addition is made, revisiting the record using the Update screen will allow the new item to replace the ‘Other’ entry’.

**How to use ACE2 to get reports and single variable and cross-tabulated charts**
All reports and charts are created from the most recent data set – the last set of saved changes to ACE2. Older versions of reports are not retained. If any report need to be retained, a .pdf version of the output can be created and stored in personal files.

Various options are available for reports. One covers Basic data, another, the full data set (Extended) for user-selected selected placements. For both of these options there is a choice of reports including:
- A Basic report detailing face-to-face work with individual clients (some of whom might also have had group-based interventions and/or indirect services) and a
- Extended Reports covering all the detailed clinical work entries
- Service & Research related activities
- Group Work – group work activities
- Learning Points - trainee reflections on their work with individual service users
- Inter-Provisional – work that involved working with other professionals
- Competences - self- evaluation of competences achieved
- Standards of Proficiency - self- evaluation of Standards of Proficiency achieved

The number of reports was extended to 13 in the 2013 update.
The form of each report heading can be selected from a drop-down menu that allows the printing – Draft version or mid- or end of placement (Final) reports. To get the report type required, decide on the inclusive placement range for the report to cover e.g. for placements 1 to 3 inclusive, enter 1 and 3; for placement 2 only, select 2 to 2, and chose any of the other options. The Trainee’s name is included automatically.

When a Report is selected, clicking Get data will produce an on-screen report with a header and some symbols in the header bar:

The Report can be viewed on-screen (and printed) – using the left and right arrows to move pages.

These Reports can be Saved or Printed.

If the pdf option is chosen, the document can be opened on screen, saved (click drop-down arrow to specify where), or cancel the operation.

(The following may be seen when these options are used. Click the Install button to get the output).

**Viewing charts and cross-tabulations of ACE2 variables**

For charts, a similar procedure is followed as for reports, but with the addition of a dropdown list to select the data to be charted (e.g. Age distribution, ethnicity distributions etc.)

The charts can be single variable distributions but ACE2 also has facilities for creating cross-tabulated charts. For instance, to see ethnicity distributions for each of the age groups, simply select the placement range; enter trainee name and the select from the drop-down lists for the variables to be cross-tabulated. This will produce a series of charts, one for the
ethnicity distribution within each age band. As with reports, these charts can be viewed on-screen and output as .pdf files.

Reports and charts will include the most up to date data saved to ACE.

**What else can be done with ACE?**
Delete any record by selecting it from the list and deleting it (permanent removal of all data) for that record.

- Delete if all trace of a record needs to be removed. Deletion is permanent. Record for same client can be started from scratch.
- No Consent / Withdrawal of consent for ACE2 Record. Use Delete if a client withdraws consent originally given for a computer record. In any such instance, delete the record.

In either case (no consent or withdrawal), if you nevertheless want to retain a reminder of the client, once deleted, go to the NEW screen and:

- In the Client ID box enter nocona (no consent) for the first client to whom this applies, noconb the next client, noconc the next, and so on, depending on how many clients previously refused or withdrew consent. All the letters of the alphabet and the digits 1 to 9 are allowable as suffixes for the ‘nocon’ codes.
- Once you have entered the Client, ACE2 will automatically disable data entry for most fields, the available fields sufficient only to enable the user to recall the client for placement monitoring purposes. The ‘nocon’ instances are included in the Face-to-face reports. If necessary, keep, securely and separately, a confidential paper record to enable you to decode your ‘nocon’ entries for supervision /placement review purposes.
- Record a Placement Number.
- Select the code CRD (Client Requested Deletion) in the Placement Type data entry box. These are the only data kept in ACE.

**Data Protection Act**
Under the General data Protection Act (2018), the subject of the record has clear rights including relating to the creation of a record. Details of the process and record subject rights are given the Help Section of the ACE-2 Portal

This option is used for clients requesting a copy of their computer record. Whether or not the client requests deletion of record at a later stage is then up to the client.

- Select placement and client.
- Print copy of record and
- A copy of the codes for handing on to the client should also be printed.

**How to end using ACE?**
Click Log Off

**Recent enhancements**
During the second half of 2013, a number of enhancements were made to the ACE Trainee Module, with similar changes made to the Tutor facilities. These changes are detailed as follows:
Dealing with Outcome Measures
a. The number and type of have been increased, with the facility to enter details of more than one of these measures in the individual client record. This new facility is only available on the Update Screen by clicking Detailed Outcome Measures bar

b. This brings up a table for entry of generic type of outcome measure

c. After making the selections click Update Details to store in the client record

<table>
<thead>
<tr>
<th>Detailed Measures</th>
<th>Select all that apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioural Index</td>
<td>Behavioural Index - physiological, other behavioural indicators</td>
</tr>
<tr>
<td>Clinician Rating</td>
<td>Clinician Rating - overall judgement of clinician</td>
</tr>
<tr>
<td>Goals based measure</td>
<td>Goals based measure - goal attainment, self help etc.</td>
</tr>
<tr>
<td>Other</td>
<td>Other</td>
</tr>
<tr>
<td>Other Individual</td>
<td>Other Individual - overall judgement of other individual (carer, teacher etc.)</td>
</tr>
<tr>
<td>Std client (PROMS)</td>
<td>Standardised Overall client completed measure e.g. PROMS</td>
</tr>
<tr>
<td>Std Infnt compld</td>
<td>Standardised measure completed by an informant</td>
</tr>
<tr>
<td>Std Meas (other)</td>
<td>Standardised Measure (other) - scales of various sorts</td>
</tr>
<tr>
<td>Stdx session</td>
<td>Standardised session by session measures</td>
</tr>
<tr>
<td>Stdx serv satis (PREMS)</td>
<td>Standardised service satisfaction rating by key informant e.g. PREMS</td>
</tr>
<tr>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>N/A</td>
<td>Not applicable</td>
</tr>
</tbody>
</table>

Dealing with Supplementary Information
a. This section is Optional, at the discretion of the course and is only available through the Update data entry tab.

b. The Supplementary Information section enables trainees and tutors to assess the broad types of client groups seen by the trainee to decide about further training needs. The variables are intended to represent higher-level conceptualisations of the characteristics of clients or problems that client has and are aligned with DCP CTCP criteria.

c. This information is available for review purposes, can be seen in dedicated reports, and the current status of the variables is available as frequency charts.

d. The more precise nature is given via the dropdown options.
   i. Imp Intel Func – Impaired Intellectual Functioning. This needs to be based on clear service-defined criteria.
   ii. Imp Comms – Impaired Communication – commonly related to language processing difficulties – must be recognised as having such difficulties by service clinicians.
   iii. Irrev Circums - mainly reflects forms of handicap that are not amenable to reversal.
iv. Sig Chal Behav – Significant Challenging Behaviours – again defined by service clinicians.

v. Vars Chronicity / Vars Severity / Vars Aetiology - Variations in Chronicity, Variations in Severity, and Variations in Aetiology, respectively. The option chosen in each instance would be consistent with service clinician views.

**General Interventions 1 & 2**

General Interventions: allows recording of up to 2 general intervention types shown below.

<table>
<thead>
<tr>
<th>General Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>You can enter up to two forms of Intervention (1 and 2). Enter what you regard as the primary piece of work as General Intervention 1 and any other substantial piece of work as General Intervention 2.</strong></td>
</tr>
<tr>
<td><strong>CBT</strong></td>
</tr>
<tr>
<td><strong>Psychody</strong>n</td>
</tr>
<tr>
<td><strong>Systemic</strong></td>
</tr>
<tr>
<td><strong>Other</strong></td>
</tr>
</tbody>
</table>
Sessions
The number of sessions provided for the client requires the actual number to completion of the contact.

Optional: new Skills information
Similar in nature to the older competence information (the latter still retained in a separate section), but with content aligned with new DCP criteria. Available in new reports and charts.

a. The tick is intended to indicate that the trainee regards their work with this client as demonstrating robust skills in this area.

b. To enter information, Click the new add Skills bar on the Supplementary Information section and click on all boxes that apply on the entry screen (below).

c. If on reconsideration, some boxes don’t apply, click to remove tick.

d. Click Update Details to retain changes.

Further special reports
1. The number of reports has been greatly extended to incorporate all new data. Because of this, two aids have been provided to help identify which variables are in which table.

2. Clicking the Home & Help Tab shows a number of options. Select Using ACE-2 shows links as follows:
   a. The Table Listing link brings up a spreadsheet of which ACE-2 variables (rows) are found in which Tables (columns). The Report Headers link shows which variables are presented in that report’s header.
   b. The Reports tab lists all the reports available – clicking the tab produces a dropdown list from which the specific table can be selected.

3. Each on-screen report now has a header to clarify its coverage and the automatic inclusion of trainee name for printed reports.

4. Reviews Tab: options Context and Skills. These provide the most recent information (snapshots) about frequency of entries under Supplementary Information and for Skills data. Identical reports for each trainee are available to Tutors.

5. Context Review
   a. This screen is shown below as Context Review Screen. This lists the main areas covered by the report such as Client Range, Service Contexts etc., as well as scope for comments arising from Reviews (see below).
Initial Context Review Screen (above)

b. To see the variables covered by the row headers, click on the row header. Any number of the variable lists can be shown at one time or clicking on each closes the list.

c. To understand the meaning of the various columns, it is necessary to distinguish between the Previous, Update and R1 to 3 columns, the meanings of E and C, and the between first-time entry and subsequent entries.

i. First-time access: this can happen at any time desired by the trainee, as can subsequent access. Each time it is opened the screen presents a snapshot of the entire trainee’s data relevant to the row variables. When this occurs on the first occasion, ACE-2 calculates the frequencies for all the variables in the Context Review Screen rows and places the frequencies in the white Update column under E. These frequencies become visible when the header for the set of variables is clicked open.

ii. The white Update C shows the default ‘X’. Clicking the dropdown arrow on the right shows the set of three options X, +, ✓. These are intended to indicate the degree of Confidence the trainee has in working with clients with the characteristic shown. For instance, if the trainee still feels not confident with clients in a state of acute distress, the X will be left unchanged; if there is some clear degree of confidence felt by the trainee - but not fully so - the + would be chosen; if confident, the ✓ will be selected.
iii. Not all the variables need to be rated every time the screen is accessed.

iv. During any session, once the data entry has been completed a .pdf file of the status of the screen can be downloaded to the Downloads folder of the computer.

v. If it is desired to store the status of this screen for the next occasion, the Save button is clicked. If not, clicking the Forget will leave the screens in the state they were in before the screen was opened.

vi. Clicking the Save will take the information in the Update column and save it for later use.

vii. Subsequent (second and later) openings of Context Review screen: The next time Context Review is activated and thereafter, the green Previous E and C columns will be populated with the values from the last saved data, and the Update columns will be populated with the current count values (E column) for each variable. Any changes made previously to the C column ratings will now be shown as the most up to date ratings.

viii. The Trainee can then review all the variables and update the C ratings if desired.

ix. The Previous E and C columns will again not change unless the Save button is used to capture the current snapshot. The cycle will then be repeated i.e. Update transferred to Previous until the next saved changes to Update.

tax. Using this approach, a snapshot can be obtained very quickly (by either trainee or tutor) but discarded or not according to requirements. If a permanent record is needed of the information at the time, the .pdf version can be downloaded.

d. Context: Review 1-3 columns: This section is optional as each course will need to decide whether or not to implement a formal review process based on the information in these screens. If so, these columns can be used to record E and C status following up to three Annual Reviews of Trainee progress undertaken by tutor and trainee, and operates in the following way:

i. Prior to a Review, the trainee updates their ACE-2 records and saves any of the C(onfidence) ratings they may have changed.

ii. During the Review, the tutor brings up and reviews the trainee’s Context Review Screen on the tutor’s computer. (This they can do for any of the trainees at any time but cannot change data.)

iii. Trainee and tutor discuss the data and consider training implications.

iv. In discussion with the trainee, there can be agreed changes to the C ratings.

v. Once the ratings are agreed and a training plan developed, the tutor can save the Update Column data and these are then transferred to R1 (for 1st Review etc.).

vi. Both tutor and trainee can each also enter text comments in their respective comments sections, using the tutor’s computer.

vii. In all future Context Review screen activations, the contents of R1 (and subsequently R2 and R3), as well as comments, are displayed on the screen, alongside those of Previous and Update column data.
e. Skills Review Screen: This works in an identical manner to the context Review process.
   i. Snapshots can be called up any time by either trainee or tutor.
   ii. Only trainees can modify the E and C column data.
   iii. The main differences are the fewer number variables, and the E column counts are of the number of times the trainee has indicated that work with a particular client clearly showed the indicated skill in operation.
   iv. Likewise, the Review process with the tutor operates in an identical manner to that described above for Context.

Charts
For the full range of additional variables charts are available and each variable can be cross tabulated with any other, within a single or across several placements.

What if there are problems with ACE?
- The most common problems arise from the way the browser is set up – make sure it allows pop-ups and that it is maximised to full screen.
- Problems sometimes arise because there is a problem at the host site – report such problems to the course administrator / responsible tutor who will contact the appropriate person.
- A special fault reporting procedure is attached as Appendix 1.

Other questions
This User Guide can be downloaded from the FAQ link on the ACE2 Portal. Consult this first. If it does not help, contact the responsible tutor in the first instance.

Suggestions for improvements or other ideas for ACE
See Appendix 1.
APPENDIX 1

ACE2 SUPPORT ARRANGEMENTS

For all problems: It helps if you can consult with a trainee from your cohort or someone from earlier cohorts. Next in line is your Course Tutor and/or administrative staff responsible for ACE. If they are unable to help, proceed as follows, ensuring you copy your Course Tutor / Administrator into the correspondence.

We identify two types of ACE2 problem:
Type A problems are to do with the running of the software, for instance reports not printing correctly, inaccessible screens etc.

Type B problems are to do with the content of ACE, such as categories of activity, clinical problems or interventions needing new items or modifications, different kinds of reports wanted etc.

Type A Problems
This will require users to email us with following Part 1 and 2 information:

Part 1. Software Problem Check-list
Identify the stage at which the problem occurs, including one or more error types (numbers 1 to 7), selected from the following:

1. Can’t access portal / log-in page
2. Won’t accept my log-in details
3. Problems with selecting options
4. Detail which option (e.g. New, Update, Report etc)
5. Problem with a particular option
6. Give details of the difficulty (e.g. Delete Option)
7. Problem with Reports
8. Standard
9. PDF
10. Problem with charts
11. Standard
12. PDF
13. Other problem – please give as much detail as you can – where you got to in the sequence, what did not happen, what appears wrong etc.

Part 2. Sole user or multiple users
Try and ascertain if you are the only one in your cohort affected – and include this information in the report submitted as below. Send the Part 1 problem code/s and as much detail as possible as well as the Part 2 answer to Martin Fenech, ACE2 system programmer martinfenech@gmail.com and to Mike Berger, ACE2 designer at m.berger@rhul.ca.uk

AND ALSO INCLUDE IN YOUR REPORT THE FOLLOWING:

Part 3. System Test
Go to the following web site using the same browser you use for accessing ACE: http://supportdetails.com/ (see graphic over-page). Enter your name and email address in the first two highlighted fields and Martin’s email in the third and send this to him by clicking ‘Send Details’. The information will enable him to determine if your computer is properly set up for ACE. This is a secure web site and will not compromise your privacy in any way.
have any concerns about this, email us and we will discuss what you can do as an option if necessary. NHS-based machines may not let you access some sites.

Type B Problems
Please discuss with your Course Tutor in the first instance, and if it is agreed that there are grounds for a possible content change for ACE, ask your tutor to email Mike Berger with detailed proposals. In the event that the changes required are agreed by the developer and other ACE–using courses, and necessitate major further programming, there may be a charge for this to the requesting course. Cost will be determined and agreed before the changes are introduced.
Appendix 2
Changes introduced in October / November 2011

Data additions:
The Update Screen gives options to enter three new additional data items:
Work observed by
Recordings made
Discussed in supervision

These data allow the trainee to detail who observed their work.
The second field documents whether or not recordings were made of trainee’s clinical sessions with this client
The third documents whether the recorded work was discussed in supervision

This screen also allows the trainee to enter information relating to a new set of options, specifically, the Health Profession Council’s Statements of Proficiency. Areas of proficiency achieved (self assessment) are noted in ACE.

ACE-2 Changes 2013
The new features include:
• A first time only entry of user information for all users, required for organising data accessed by tutors through ACE2Admin.
• A new ‘look’ to the user interface
• Tabbed headings for the main sections
• Field definition pop-ups when the mouse arrow passes over the field header,
• Some fields in the data entry screens have been re-ordered to make them easier to navigate and more coherent
• New fields and reports have been introduced that can be included in periodic reviews based on criteria specified by the BPS Division of Clinical Psychology. Not all courses will necessarily require the new information to be entered by trainees.
  o The major changes involve the introduction of a Supplementary Section in the Update Screen and
  o A new version of the competence section called ‘New Competence’ reflecting changes in the conceptualisation of competences. Because some trainees are completing their training under the earlier competences schema, the older version remains for the time being.
• ACE2 now produces cross-tabulated charts in addition to the single variable charts. Access via the Reports Tab and Cross tab. Suggestions for additional cross-tabs or other analyses are welcome.

THESE CHANGES ARE NOT IMPLEMENTED BY ALL COURSES USING ACE2 – MAKE SURE YOU ARE CLEAR ABOUT WHAT IS REQUIRED FOR YOUR COURSE.

ACE2 has also been reprogrammed to take advantage of new software and the updated server. While the functions and reporting features remain essentially the same, they are accessed differently and also look different to the original ACE. The main changes are in the way Reports are accessed and the appearance of the charts. These differences are noted in the appropriate section of the User Guide. Please consult these sections for information about the operation of the new system.
May 2019 Changes
Introduced to comply with the General Data Protection Act, 2018

Appendix 3 - ACE2 gallery of changes

User Interface

ACE2 Audit of Clinical Experience Portal
Hosted @ Royal Holloway, University of London

About ACE
For information about ACE contact m.berger@rhul.ac.uk

Opening Screen

WELCOME TO ACE
ACE - Audit of Clinical Experience
Enables trainees to record details of placement client contacts during training. Key data are strongly encrypted in the event of unauthorised access. ACE also provides for a range of reports and charts to enable trainees, supervisors and course tutors to audit the content of placement activity and to use the information for mid- and end-of-placement reviews and annual appraisals. Other options allow for service users to obtain a full copy of their ACE record and for individual records to modified or deleted. At the end of training, when the whole cohort has completed, all records for the cohort will be deleted by the source.

ACE Access
The associated Administration module uses data from ACE for course-related monitoring activities to be implemented and to allow registered course staff to delete oaths or individual trainee records and to add new administrators and tutors to enable access to ACEAdmin.

All the data and material on this site are confidential. Any breaches should be reported to the responsible course tutor and the developers.

Mike Berger: m.berger@rhul.ac.uk
Martin Fenech: martinfenech@gmail.com

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Screen Options

Data Entry Screen Options

New Mouse-over Field Information

Assessments

Interview
Obs Asmt
Interv Ind
Obs Asmt
Systematic
Psych Per
Psychmet Qtr
Psychmet Neu
Rev Docum
Other
N/A

Interview
Observe an Assessment
Informal Observation
Systematic Observation
Psychometric Performance
Psychometric Questionnaire
Psychometric Neuropsychological
Review Documentation
Details in Other Box
Not Applicable
New Supplementary Section in Update Screen

New Competences Report
Report Options

ACE®-2 Audit of Clinical Experience

Sample Report

Demo

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<th>Ethnicity</th>
<th>Referrer</th>
<th>Problem</th>
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<td>White</td>
<td>British</td>
<td>Crime Justice</td>
<td>Personality</td>
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</tr>
</tbody>
</table>
Chart Options

**ACE-2 Audit of Clinical Experience**

**Chart Options**

**Sample Cross-tab Charts**

**ACE-2 Audit of Clinical Experience**

Sample Cross-tab Charts