

I am a single speciality ICM trainee with a background in ACCS emergency medicine.

Stage 1,2 and 3 training for them

To complete my stage 1 training because I was an ACCS Emergency medicine I needed to complete 6 months of Intensive Care Medicine and Anaesthetics. I did ICM first, which I think in hindsight it would have been better to do anaesthetics first, so I had more experience under my belt intubating having a non-anaesthetic background.

Stage 2 involves speciality rotations and completing your special skills year. I am doing a year in Quality Improvement. The special skills year is still fairly new as single speciality training is still new. There are things that need ironing out and with the new curriculum it will be interesting to see how the special skills year fits in. My advice would be if you are a single speciality trainee start planning your special skills year as early as possible as it has the scope to really add to your career but requires careful planning and organisation.

Stage 3 is usually split into 2 6-month blocks and this is when you consolidate your knowledge and usually will be in the hospitals you are considering working at as a consultant.

Thoughts on training in the region

There are certain modules that need to be completed at particularly hospitals for instance cardiac intensive care needs to be done at Wythenshawe or Blackpool which can lead to long commutes, but this is only for 3 months and is doable.

I think its important to work in a variety of Intensive Care Units, each unit will have a slightly different way of doing things which is important in shaping you as an Intensive Care doctor. It is as important to work in smaller district general hospitals as the big teaching hospitals as you learn different skills in each. Remember as well that each hospital you work in post ST3 you are considering is this somewhere I would want to work as a Consultant. ST7 and applications for consultant posts come up a lot quicker than you realise.

The portfolio and cross linking challenges

As a single speciality trainee, I have the luxury of not needing to cross link my portfolio. ICM uses NHS e-portfolio which although it can feel a bit clunky works very well. My main gripe with the portfolio is that for each stage of training a new curriculum needs mapping too, unfortunately it does not carry forward relevant mapping from the previous stages, so each section then must be re-mapped. Speaking to dual trainee colleagues they have found the cross linking to be fairly time intensive and laborious. At the end of the day though it has to be done, so just don't leave it till the last minute.

The ARCP process

However, organised you are ARCP always seems to be stressful, there always seems to be one form you are scrabbling around trying to get signed off at the last minute.

I think my advice for ARCP is start early, find out what the requirements for the entire year are at the start of the year or placement and then meet with your supervisor to set targets to aim for in your portfolio. Breaking it down into manageable chunks makes it seem easier. Ensure that your portfolio is organised into folders to make it easy for you to cross link and prove evidence. This also makes it easier for your assessors. If you find that you are not getting the required number of work based assessments or you are struggling to map something then meet with your supervisor early. If things are sorted early, it's a lot easier. If you find your supervisor doesn't know, speak to other people. Generally, there will be someone who has had the same problem and can help you out.



I think some of my favourite moments are when you turn patients back into people; seeing them smile when the therapy pets come to visit, seeing the long term rehab patients eat and speak for the first time in a long time and their faces when you take them out into the garden. It reminds you that there is always a person behind the patient.

And finally, one thing I would do differently - at the risk of causing outrage! For me I would do ACCS anaesthetics as I feel this would have given me a more solid background in airway skills.