

Specialty School Training Overview 2018

Geraint Briggs, Training Programme Director

Welcome to the North West School of Anaesthesia training programme for ST3-7.

The North West School is part of Health Education England North West (HEENW), which used to be known as the Deanery, and comprises both the North West and Mersey Schools of Anaesthesia.

Link to the specialty school website at HEENW: <https://www.nwpgmd.nhs.uk/specialties/school-of-anaesthesia>

Other information regarding the region, courses and ARCPs can be obtained on: <http://www.nwanaesthesia.org.uk/> and <http://www.eanaesthesia.com>

The North West is a large region, from Lancaster to Wythenshawe, and during the course of the 5 years you will need to commute for some of the time, as many of you live in South Manchester, and there training opportunities all across the region. We will try to keep you reasonably close to home in ST4 while you are doing the exam, but after that you will be sent where you can obtain the training you require.

Your rotation is not planned out from the day you start, but is updated on a three-monthly basis, and will be posted on the mmacc website. There are approximately 200 trainees all of whom have specific training needs, and so there are changes that can be made to your rotation at short notice, but we will endeavour to minimise these.

Your training is managed by the School Executive, which comprises:
Speciality School Manager – Emma Woods emma.woods@nw.hee.nhs.uk

Head of School – Dr Sarah Thornton, Royal Bolton Hospital sarah.thornton@boltonft.nhs.uk

Royal College Regional Adviser – Dr Simon Maguire, Manchester Foundation Trust, simon.maguire@mft.nhs.uk

Training Programme Director (Higher) – Dr Geraint Briggs, Manchester Foundation Trust geraint.briggs@mft.nhs.uk

Training Programme Director (Core – South) – Dr Kirsty MacLennan, Manchester Foundation Trust kirsty.maclennan@mft.nhs.uk

Training Programme Director (Core – North) – Dr Oliver Pratt, Salford Royal Foundation Trust Oliver.pratt@srft.nhs.uk

Training Programme Director (LTFT) – Dr Karen Kidner, Royal Preston Hospital karen.kidner@lthtr.nhs.uk

The Executive meet regularly, as does the School Board, which is made up of the Exec, all the College Tutors and the Trainee Representatives.

The Trainee Representatives are:

Higher – Mohammed Akuji

Intermediate – Ross Milton

Core – Loren Zelic

ACCS – Nick Plummer

LTFT – Bernadette Lomas

Intermediate training ST3/4

It is imperative you now register with the college as a Specialist Trainee. There is a form to complete on the college website.

<http://www.rcoa.ac.uk/careers-training/training-anaesthesia/training-programme-forms-and-certificates>

You will also need to be on the e-portfolio, as all North West School ARCPs are now electronic. You should be automatically registered after accepting an ST3 post, however if you do not receive a login you will need to contact emma.woods@nw.hee.nhs.uk.

In the first 2 years you will be doing Intermediate Training this requires you to do a large number of modules and you need to keep on top of the paperwork or you will be snowed under when it comes to ARCP time.

You will be completing the 2010 RCoA curriculum, and in this regions' programme the first year is composed two 6month blocks. One block will at a cardiac hospital, and one at a neuro hospital where you can get the subspecialty units of Cardiac anaesthesia and Neuro anaesthesia. During that year you will also obtain 2-4 other units of training out of paediatric anaesthesia, chronic pain, ICM, obstetrics and general duties.

The 2 years are planned out so you will be able to obtain all the competencies you need for intermediate training. You will usually then be placed for a whole year in one hospital to complete the rest of the ST3/4 curriculum.

Compulsory Units of Training (UOT) are:

Key units

Cardiac Anaesthesia
Neuroanaesthesia
Paediatrics (undertaken at the non-specialist centres)
Obstetric Anaesthesia
Chronic Pain
ICM

General duties units

Airway management
Critical incidents
Day surgery
General, urological and gynaecological surgery
ENT, maxillo-facial and dental surgery
Management of respiratory and cardiac arrest
Non-theatre
Orthopaedic surgery
Perioperative medicine
Regional
Sedation
Transfer medicine
Trauma and stabilisation

There are other additional optional units such as vascular, plastic/burns, ophthalmic which are not compulsory.

There are a number of WPBA that need to be completed for each Unit of Training. These can be found in the curriculum (<http://www.rcoa.ac.uk/system/files/TRG-AS-ASSMNT-GUIDE2010.pdf>), the e-portfolio and on the eanaesthesia.com website. Note that individual WBPA can be linked to more than one Unit of Training.

The curriculum can be found at <http://www.rcoa.ac.uk/index.asp?PageID=1479>.

During Intermediate Training you will be expected to pass the Final FRCA, usually in ST4. The Final FRCA has a written component of a Short Answer Question paper and an MCQ/SBA paper, followed by a SOE. There is a North West Final FRCA course based at Central Manchester Foundation Trust, that you should attend, and exam courses, details of which are on the [nwanaesthesia](http://www.nwanaesthesia.co.uk) website.

Once you manage all that, you will be awarded a certificate of completion of intermediate training at your ARCP, which you need to send to the RCoA who will give you a CCT date. The Royal College will **NOT** allow you to go Out of Programme (OOP) during this period.

Teaching

During Intermediate Training you will be expected to attend the Final FRCA Course at Central Manchester and the exam courses. On top of this is a weekly Final FRCA Tutorial Programme, which takes place on a Wednesday morning at UHSM, SRFT or Preston depending on which part of the School you are currently in.

Higher Training ST5-7

Higher Training is when you decide what you want to subspecialise in within anaesthesia, and we try to tailor your rotation to cater for those needs. If you want to go OOP in order to get training opportunities that are not offered by our rotation that is best done in ST6, as it enables you to get it organised after Final FRCA and gives us some notice to sort out the rotation, not to mention the fact you then feel confident enough in your skills to get the maximum benefit out of the experience.

During this period, it is important that you communicate with the Training Programme Director on geraintbriggs@mac.com about any changes in your circumstances - babies, relocation and OOP plans, so that we can help you and also keep the rotation working. We need 6months notice of OOPT (see separate section for more details about this) at the very least, and ideally babies as soon as you are telling the world.

You will need to revisit, and complete all the essential higher modules, which are

Essential Units of Training

Cardiac

Neuro

Paeds (at the tertiary hospital for 3 months)

ICM

Airway

Management of Cardiac and Respiratory Arrest

Perioperative medicine

Plus 6 other general UOT, and an advanced year.

Other than paediatrics, which is usually in ST5, these UOT can be completed at any time during ST5-7. They do not have to be completed in one hospital, so you may gain competencies at several hospitals before the UOT is issued.

Teaching

During Higher and Advanced Training there is a tutorial programme for post-fellowship trainees only, Countdown to CCT. This occurs 8-9 times a year, and moves from Trust to Trust. It is a full day of clinical and non-clinical teaching, to prepare you for becoming a consultant. There is a link to this from the nwanaesthesia website.

Advanced Training

Everyone has to now do advanced training in ST6/7. You can only do a year of advanced training and it may either take in a full year or two six-month blocks.

In this region we provide advanced years in:

Cardiac Anaesthesia (contacts)

pedrofernandez@ntlworld.com

lee.feddy1@uhsm.nhs.uk

drmattstagg@icloud.com

Neuroanaesthesia

Joe.sebastian@srft.nhs.uk

Martin.letheren2@lthtr.nhs.uk

Paediatric Anaesthesia

Rosalind.morley@cmft.nhs.uk

Catherine.doherty@cmft.nhs.uk

Chronic Pain

Nicholas.hacking@lthtr.nhs.uk

Regional anaesthesia

James.corcoran@srft.nhs.uk

Obstetrics

Kirsty.maclennan@cmft.nhs.uk

Perioperative medicine

Oliver.pratt@srft.nhs.uk

These are within region posts so you will be sent on invitation in ST5 to apply and be competitively interviewed against your cohort. The invitations go out before Christmas for interviews in Jan/Feb, and the advanced year generally commences at the start of ST6.

If you do not decide to do a single speciality advanced training year, you will do an advanced year in general duties, which involves 2 different modules. This may be 6 months paed, 6 months obstetric, 6 months regional, 6 months airway, hepatobiliary, vascular, orthopaedics, etc. These are organised individually with the TPD.

CCT in Intensive Care Medicine

The only entry into ICM is now via a separate application process, and competitive interview process. You will need to apply for both anaesthesia and ICM if you want a Dual CCT. If you need further information, please contact a member of the training committee.

School of ICM Training Committee comprises:

Head of School ICM - Ken McGratten – Royal Preston Hospital.
Kenneth.mcgrattan@lthtr.nhs.uk

Regional Advisor ICM - Sarah Clarke - East Lancs.
Sarah.clarke2@eltht.nhs.uk

Training Programme Director ICM - Aj Eusuf – Royal Bolton Hospital.
ajmaleusuf@hotmail.com

Teaching

There is a separately organised ICM tutorial programme for those preparing for the FICM exam.

Less Than Full Time Training (LTFT/Flexible Training)

The less than fulltime training advisor is Karen Kidner, her email address is karen.kidner@lthtr.nhs.uk, and you should contact her before you start the process of applying for LTFT training.

The Deanery requires you to fill in a form electronically for judging your eligibility. Categories include caring for children, relatives and also personal circumstances such as chronic illness. The link to this form is:

www.nwpgmd.nhs.uk/content/less-full-time-training

You then need to speak with Karen and decide on the percentage you would like to work, with most people going for 60%, and start date. We prefer you to be 60%, as we can 'slot share' you and the hospital gets 2 for one, which takes the pressure off you somewhat. This then then needs to be communicated with the TPD and the Royal College so they can adjust your CCT date accordingly.

Obviously this will extend your training but is not permanent, and if you which to go back to fulltime you need to let myself and Karen know, and that will not occur till the next changeover date. Every time you move hospital there is an electronic deanery form you need to send to Karen, to pass to onto your new College Tutor so that HR can get your pay and banding organised before you move.

There is a comprehensive document on LTFT linked through to the nwanaesthesia and eanaesthesia website.

Travel and Accomodation Expenses

As mentioned earlier, you will have to travel at some point in your training. Travel expenses are available, from your home to the hospital that you are working at, and need to be signed off by the College Tutor or the Clinical Director of the Department. To obtain the higher rate of mileage, you will need to prove that you are unable to get to work by public transport.

It is possible to claim for a combination of travel AND accommodation expenses. To claim accommodation expenses you must fulfill the following criteria

- 1) own a property >40 miles away from the hospital you are being placed in.
- 2) have evidence of owning this property (I.e. mortgage documents)
- 3) have evidence of utility bills being paid for this property

In addition to this you can claim travel expenses (for example if you were to travel to the hospital Monday morning and work until Wednesday and then also be working Friday to Sunday you could claim for two return journeys).

The maximum available per month for accommodation AND travel combined is £800.

Claiming for both travel and accommodation is through the "easyexpenses" system.

Please see below link for details of document from Pennine Acute which details all of the above information.

http://www.pat.nhs.uk/education-and-research/Lead_Employer/Lead_Employer_Documents/Easy_Expenses_FAQs_-_Trainees.docx

Out of Programme Training

We are as a region happy for you to do Out of Programme Training (OOPT), but it MUST count towards your training. The only thing allowed by the deanery as an Out of Programme Experience (OOPE) is voluntary work, and the maximum they will allow you is 6 months. The process of organising it can be longwinded, and if you are considering it you need to communicate well and apply early to have the best chance of success. The best time to do it is in ST6 and you will need to start organising it as soon as Final FRCA is out of the way.

The college has categorically stated that it will not allow OOPT in your intermediate training ST3/4. The deanery insists on a minimum of 6 months notice so you MUST get your forms in before February to go in August, we would prefer to know sooner than that if possible. We now have an excellent database of OOP placement done by trainees from this region. If you follow this link, you will find descriptions of each placement and contact details to help you organise it yourself: www.eanaesthesia.com/oope/

GAT also provides an excellent booklet to help you.

The College and School of Anaesthesia will only allow OOPT that has been PROSPECTIVELY approved by the GMC, will only approve one year as OOPT, and the training must be mapped to Higher/Advanced competencies in the 2010 Curriculum.

You will need to find a hospital that accepts your application and then fill in a form for the deanery that requires a signature from me, Sarah Thornton and Russell Perkins. You will also need the signature of the Chief Exec of the Trust you are leaving, to ensure your pension contribution and NI are paid in your absence. They will only be paid for 6 months and then you will have to fund them yourself.

The College also has a form for you to fill in that requires all the same signatures except the Chief Exec. They will also require a report at the end of your OOPT about your experiences if you want this period to count as training. The key to make a successful OOPT experience is good communication and planning and it will work out fine.

Study Leave

Your post comes with a Study Leave budget that is managed by the School of Anaesthesia, not by the Trusts that you are working at.

All Study Leave is applied for electronically, and needs agreement from the Tutor and the School prior to funding.

During Intermediate Training, your Study Leave budget should be used towards helping you pass the Final FRCA, and so is used for the course at Central Manchester and the exam courses. There are also other mandatory courses, such as the Human Factors Simulation Course. Other exam courses will not be funded, but you **might** be granted the time for self-funded courses by your College Tutor. You may be able to apply for other courses outside of the exam, but these are at the discretion of the Tutor and the School.

During Higher and Advanced Training, you should use your Study Leave towards attending courses that you are interested in and will demonstrate dedication to your chosen subspecialty of anaesthesia.

Final note

Just to say the next 5 years are extremely busy both training wise and personally with many of you getting married and having kids whilst doing exams and commuting around the region and heading off to foreign countries. We are well aware how much happens to you during this time having gone through it ourselves. If you are struggling with any aspects of the programme or just Life in general our doors are always open for a chat and advice all of which is completely confidential.

That said, the majority of you will sail through without any problem and enjoy the process immensely.