

NW School of Anaesthesia

Stage 1 Rotation – Guidance

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A document for Anaesthesia College Tutors, Educational Supervisors & Stage 1 Anaesthetics Trainees

Introduction to Stage 1 Anaesthetics

Stage 1 training in anaesthesia will normally consist of 3 years, named CT1-3. Trainees joining the programme from ACCS, will normally complete 4 years in total. We would expect each of these years to be spent in a different hospital, but trainees may occasionally rotate between hospitals more frequently in order to maximise learning opportunities.

It is important that Trainees and Trainers understand the learning objectives which are to be completed in each hospital, in order for the rotations to work smoothly, and training progress to be made.

This document will aim to summarise the aims of each year in Stage 1. This is guidance only. The regulations & precise requirements are detailed in the RCOA curriculum documents which can be viewed at:

<https://rcoa.ac.uk/documents/2021-curriculum-learning-syllabus-stage-1/introduction>

& <https://www.rcoa.ac.uk/media/21671> (The “HALO” guide)

The RCOA website “training hub” will usually be the best source of information for changes & updates to the curriculum <https://www.rcoa.ac.uk/training-careers/training-hub>

The requirements for Anaesthesia ARCPs in the NW School of Anaesthesia can be seen at <https://eanaesthesia.com/arcp/>

Domains of Learning & HALOs

The stage 1 curriculum has 14 Domains of learning. At the end of Stage 1 training (the end of CT3), trainees must have completed their learning objectives for all 14 domains, and have completed a “HALO” form with their Educational Supervisor, College Tutor, or Lead Trainer.

At ARCP – we expect to see evidence being accrued towards domains of learning in CT1 & 2, but no HALOs are definitively required. Some trainees may feel able to complete some of the HALOs in CT2, but in general sign offs should occur in CT3. For a CT3 ARCP, all 14 HALOs must be present on the Lifelong Learning platform.

The paperwork requirements for the end of CT3 are therefore greater than they are for preceding years.

As a trainer, when signing off a HALO, you must be sure that the trainee has accrued evidence mapped to each of the Key Capabilities specified in the HALO guide for that domain of learning (<https://www.rcoa.ac.uk/media/21671>). Key capabilities are grouped together in “clusters”. The actual requirement is that evidence needs to be mapped against each “cluster” – but we feel that over 3 years, trainees should be able to demonstrate evidence mapped to most key capabilities.

Other evidence may be required when signing off a HALO - such as a multi-trainer report (MTR). As a HALO represents the sign off at a particular stage of training, it’s important that you are happy that all evidence is there before signing off. College Tutors will be able to advise if in doubt.

Some evidence will be provided by successful completion of study days & stand-alone courses attended throughout Stage 1 Training. Details of the study day programme & study leave regulations can be found at <https://mmacc.uk/nw-anaesthesia/study-leave>

It’s envisaged that the HALO sign-off for the generic professional domains of learning will be done by Educational Supervisors. Some of the clinical domains may be signed off by “lead trainers” – eg ICM Faculty Tutor, Pain Medicine Tutor. For some of the larger HALOs – it may be appropriate to establish a training “faculty” within a department to share the responsibility of a final sign off. This should be arranged on a manner to suit individual departments, and should be co-ordinated by College Tutors.

Below is a summary of the training requirements for each year in stage 1 training.

CT1 – Requirements

- CT1 represents the introduction to anaesthetic practice.
- The initial aim should be completing the Initial Assessment of Competence (IAC) using the “Entrustable Professional Activity” workbooks (EPA 1&2) which can be downloaded at <https://www.rcoa.ac.uk/documents/2021-curriculum-assessment-guidance/entrustable-professional-activities-iac-iacoa>
- Most clinical time in CT1 should be spent in Theatres, but if the trainee wishes, or the department requires it, they may undertake a 3 month ICU block towards the end of CT1
- CT1 Trainees should start to accrue evidence of Key capabilities in all learning domains, both clinical and generic.

CT2 – Requirements

- Theatre work continues in CT2
- An initial 3 month block of obstetrics should be undertaken, culminating in the Initial Assessment of Competence in Obstetric Anaesthesia (EPA 3&4) <https://www.rcoa.ac.uk/sites/default/files/documents/2021-06/EPA-3and4-workbook.pdf>
- If an initial ICU block was not undertaken in CT1, it should be undertaken in CT2
- Trainees joining from ACCS do not need to undertake an ICU block
- Theatre work should include experience necessary to complete outstanding Key Capabilities from all domains of learning. This should include initial exposure to paediatric anaesthesia.

- Evidence of experience in other clinical domains should be accrued – including pain medicine, resuscitation, sedation etc
- Key capabilities from the Generic Professional Domains should continue to be accrued.
- The primary FRCA has to be passed by the end of CT3. We would advise most trainees to attempt the written paper in CT2 as a minimum, and if passed consider the oral exam towards the end of CT2

CT3 – Requirements

- CT3 will be the final part of Stage 1 training. It is important that the trainee and Educational Supervisor establish what is outstanding at their initial meeting, and formulate a plan to ensure exposure to appropriate clinical areas.
- A second 3-month ICU block must be undertaken by all (Non-ACCS) CT3s.
- Experience of out of hours, on-call Obstetrics must be gained in CT3. This should include management of ASA 3 parturients. We expect this to necessitate some daytime obstetrics commitment, but not necessarily a full 3-month block.
- Experience of paediatric anaesthesia should be expanded, including remote supervision as specified in the General Anaesthesia HALO guide.
- By the end of CT3, all 14 HALOs must be signed off, and the Primary FRCA passed.

Completion of Capability Cluster (CCC) Forms

Some of the “larger” clinical domains of learning, such as General Anaesthesia & Regional Anaesthesia, have Key Capabilities related to a specific subspeciality area such as Obstetric Anaesthesia or Paediatrics.

If a trainee has gained all key capabilities in one of these subspeciality areas, but is not yet ready to have the whole HALO signed off, the educational supervisor or lead trainer should complete a “Completion of Capability Cluster” form (CCC form).

In Stage 1, CCC forms are used to show attainment of appropriate experience in Paediatric and Obstetric Anaesthesia.

If an educational supervisor is planning to sign off a HALO which includes paed/obs capabilities (eg General anaesthesia) in the same hospital where paediatric/obstetric experience has been gained, the CCC is not necessary.

However, if the trainee is moving to a new hospital where further obs/paed experience is not likely, and the trainee is not ready to have the full HALOs signed off, the CCC form(s) should be completed and uploaded to the lifelong learning platform. These CCC forms allow a subsequent educational supervisor to be confident that appropriate experience in the subspeciality areas of anaesthetic practice has been attained.

Details of the CCC form can be found at <https://www.rcoa.ac.uk/documents/2021-curriculum-assessment-guidance/assessment-discrete-areas-anaesthetic-practice-within>

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