

NW School of Anaesthesia

Supervision, Study leave & Educational Development Time

V1.0 - May 2022

Solo work and Supervision

The majority of anaesthetic sessions will be directly supervised for most trainees. Over the course of a placement, a Trainee should average 3 directly supervised training lists per week. We suggest however, that appropriately chosen solo lists are an important source of experience in both clinical and generic professional domains of learning.

We suggest the following frequencies as a a guide:

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|------------------|----------------------------------|
| CT2 | 1 solo session every 2 - 4 weeks |
| CT 3/ ST4 | 1 solo session every week |
| ST 5/6/7 | 1-2 solo sessions per week |

Solo lists should be indirectly supervised by a nominated & named consultant who is locally available, and able to leave other commitments to assist with any problems.

This guidance is designed to recognize the importance of Solo work as part of training, and as such reassure departments that trainees can be allocated appropriate lists. The provision of such lists is not mandatory, however.

Educational Development Time (EDT) (Previously SPA)

From August 2021 trainees will be allowed to take weekly Educational Development Time (EDT). This time can be used as the trainee wishes, but evidence of achievements gained during EDT may be asked for at ARCP. Examples of EDT work would include viewing online tutorials, completing QI projects, being involved in teaching and training activities, working towards further post-graduate qualifications and preparing applications for ST4, consultant jobs or other roles. EDT also allows trainees to attain & collate other evidence towards the Generic Professional Capabilities specified in the 2021 Curriculum.

EDT is separate to Study Leave and takes the place of “protected teaching time” - previously used for the Primary and Final weekly tutorial programmes.

EDT is voluntary and trainees may prefer to spend this time in the clinical workplace. Trainees who miss EDT due to on-call commitments, nights or post on-call days, are not able to request that this be taken at another time. This ensures that there is a balance between time spent doing clinical, and non-clinical work.

In exceptional circumstances, Trusts may require trainees to work clinically in place of their EDT. This is understandable & acceptable, but should be the exception, not the norm. If trainees routinely miss out on EDT the College Tutor should be informed.

The School of Anaesthesia has suggested specific days on which EDT will routinely be taken. This predictability makes it easier for Trusts to allocate rota sessions, and allows the School to arrange specific training days etc.

Trainees working less than full time should take EDT on a pro-rata basis - for example a trainee working 60% should take EDT for one half day every 2 weeks. LTFT trainees may also request alternative days for their EDT if the suggested days clash with days off. These arrangements should be locally agreed with host Trusts.

More details about EDT activities for each stage of training can be found on the MMACC website - by following this link [Study Leave & SPA | MMACC.UK](#).

See also **Appendix 3** for RCOA view on educational development time.

Study Leave Regulations

Trainees are allocated up to 30 days of study leave per year of training & each trainee has a fixed budget. As the money is held for the school, some trainees (usually the more senior) can be allowed to exceed their budget, whilst others (usually the more junior CTs & STs concentrating on exam success) will often underspend. Study leave is granted at the discretion of the Head of School or nominated deputy. The 30 days may end up being unevenly distributed between different hospitals in a given stage of training.

The School of Anaesthesia top slices study leave budgets & uses the money to provide specific training opportunities in Stage 1 & Stage 2. As such, local primary & final FRCA courses, stand-alone courses, simulation days & “special Wednesdays” etc. will all automatically be granted as study leave. These NW regional teaching days are designed to aid exam preparation.

We expect trainees to attend **all** of the training opportunities paid for by the top-slice, unless there are exceptional circumstances (post call, annual leave etc).

Attendance at the school courses may lead to an uneven split of study leave between trusts. Any additional study leave requested should be shared as evenly as possible between different hospitals in a given academic year. Leave requests are granted at the discretion of the rota-master of each hospital.

Prior to the FRCA exam, trainees may be given up to five days of private study leave in addition to the time to attend the examination. HENW allow up to 7 days private study per year, which includes the exam day itself. As such - private study will be granted up to a maximum of 5 days *per year*.

Exam Fees and expenses are not paid from the study leave budget.

Trainees may apply for overseas study leave once only during their training, an award towards (not fully) the costs of travel and accommodation may be given at the discretion of the Associate Dean.

STAGE 1 TRAINING

The focus of stage 1 training should be gaining solid clinical skills in anaesthesia and passing the Primary FRCA Exam. Therefore, in CT1 & CT2, study leave will not usually be granted for anything other than the regional "top sliced" teaching courses & the North West exam preparation courses. In CT3, new training opportunities are being developed which will prepare for transition to the "registrar" grade (ST4+) and provide training in the generic professional competency elements of the 2021 curriculum. These training opportunities will again be funded by a top-slice, and we expect all trainees to attend.

It is common for trainees to ask for life support courses to be funded during stage 1 training (ALS, APLS, ATLS etc). We recommend that these courses are undertaken after success in all parts of the primary FRCA exam. Whenever possible, local part-funded courses should be chosen. It is unusual for more than one resuscitation type course to be funded during stage 1 training.

Locally arranged teaching & exam courses already provide significant time away from clinical work, so further study leave for exam preparation courses will not be supported.

Trainees who are repeating any component of the Primary FRCA may apply to attend the locally arranged teaching in the Mersey side of the School. This is different to the commercial courses run by MSA - which are not usually funded.

Trainees sitting the Primary FRCA MCQ/SBA paper will be offered access to the website www.onexamination.com for a 2-month period & this will be paid for.

We recognize that development of teaching skills is important & features in the 2021 curriculum. In Stage 1 training, teaching skills can be developed within the training programme, and study leave for teaching and instructing is therefore not usually granted in stage 1. Generic Instructor/ATLS Instructor Courses are no longer funded by HEE.

The generic professional capability aspects of the 2021 curriculum will be catered for in a number of courses. These study days should normally be undertaken in CT3, but there is some flexibility between CT2 & CT3. We expect all stand-alone study days to be completed by the end of CT3.

Whilst there is discretion for those trainees who pass the Primary FRCA exam early in Stage 1 training, overseas study leave is not usually be supported.

A list of provided courses & study days for is seen below in **Appendix 1**.

Stage 2 TRAINING

The focus of Stage 2 training should be completing the necessary HALOs and passing the Final FRCA Exam. Thus, study leave will not usually be granted for anything other than the regional teaching courses, attending the exam, exam preparation courses and life support courses. An in-date ALS should be the priority for life support courses and these courses are often available at your local Trust. **Locally arranged teaching courses already provide time away from training to prepare for the Final FRCA and so further study leave for exam preparation will not be supported except for those courses listed in Appendix 1.**

Trainees who are repeating any component of the Final FRCA may apply to attend the locally arranged teaching in the Mersey side of the School.

Local Study Days on specialist areas may be supported, provided the trainee can demonstrate it is supporting their learning.

Whilst developing teaching skills is important, this can be done as part of the training programme, so study leave for teaching and instructing will be limited to 5-days per training year, providing the trainee has not exceeded their study leave time. Any teaching and instructing activity must be supported by evidence of consultant supervision and a plan for completion of work place based assessments.

There is some discretion for those trainees who pass the Final FRCA exam within their first year of Stage 2 training, but overseas study leave will not usually be supported.

Stage 3 TRAINING

Senior trainees will have a more diverse range of learning needs, as they develop their career aspirations. Thus, they should become more self-directed in their learning and identifying their learning needs. Stage 3 trainees must make every effort to attend the Post-FRCA Study Meetings (Countdown) which are funded from the top-slice budget.

Stage 3 trainees will be offered a mentor for the rest of their training. This will normally be arranged after passing the Final FRCA.

Overseas study leave will usually only be supported once during Stage 3 training and the financial support may be limited. This will be at the discretion of the Postgraduate Dean.

Once again, development of teaching skills can usually be done as part of the training programme, so study leave for teaching and instructing will be limited to 5-days per training year. Again this must be supported by consultant supervision and the opportunity to complete WPBAs, ideally in conjunction with the Edge Hill Teaching Module. Time for educational activities is discretionary, but if a trainee is involved in developing (for example) new regional courses then more time will be allowed after discussion with the study leave lead.

Appendix 1: NW School of Anaesthesia list of provided/approved courses

| Year | Approved Courses | Often refused |
|--------|---|---|
| CT 1/2 | <p>Primary FRCA course 18 days in 9 X 2 day blocks</p> <p>Stand-alone mandatory courses (top sliced from budget). Usually attended in CT1/2 – but may be carried over in to CT3</p> <ul style="list-style-type: none"> • Transfer course - 1 day • Intro to obstetrics course - 1 day • Airway Course - 1 day • Critical incident Simulation - 1 day • Intensive Care Course - 1 day • Medical device training - 1 day <p>Exam Preparation Courses</p> <ul style="list-style-type: none"> • MCQ - 3 days • OSCE/VIVA - 2 days <p>Private study prior to primary FRCA (max five days per core training year) plus study leave to take exam</p> <p>If fail primary examination:</p> <ul style="list-style-type: none"> • BASICS course in Liverpool (overnight expenses not paid) <p>Subsequent Exam fail:</p> <ul style="list-style-type: none"> • One RCOA approved exam practice course (time and course fee paid) | <p>Out of region exam courses unless failed after local course.</p> <p>Other courses including ATLS, APLS etc only usually allowed once primary exam completed. Course fees come out of remaining budget.</p> |
| CT3 | <p>CT3 Study Days:</p> <ul style="list-style-type: none"> • Education & Training • Teamworking • Professional Regulation • QI • TIVA • Research Methodology • Need for Paeds • Regional Anaesthesia (Stepping Hill) • Salford Trauma Course <p>ALS/Resuscitation Course</p> <ul style="list-style-type: none"> • Usual for no more than one course resuscitation course to be funded across stage 1 | <p>Resuscitation Council Generic or ATLS Instructor Course no longer funded</p> |

| | | |
|------------------------|--|---|
| <p>ST4/5</p> | <p>Final FRCA Course (MRI) - 10 days</p> <p>Regional teaching days/tutorial programme half day a week (neuro,cardiac and paed) special weds full day 8 days.</p> <p>Local Exam preparation courses Intro day 1 day Viva days 2 x 2 days SAQ/MCQ/SBA 2 x 2 days</p> <p>Return to work course 1 day</p> <p>All above free to trainee (paid for by top slicing £100 per trainee off study leave budget)</p> <p>ALS Private study prior to FRCA (max five days. Exam leave 2 days</p> | <p>National Exam preparation courses (time only) unless fail after local course then only RCoA recommended ones will be funded.</p> |
| <p>ST 6/7</p> | <p>Regional Post FRCA teaching Days (Countdown to CCT) 8 days a year. Regional simulation days Human factors 1 day Advanced airway day 1 day Interview practice course 1 day Advanced obs 1 day Return to work course 1 day All above free to trainee (paid for by top slicing £100 per trainee off study leave budget)</p> <p>ALS and other specialist Life support Courses eg ATLS, APLS, MOET etc</p> <p>Broader based CPD activity related to Sub-specialist interest: TOE, FOI, U/S etc</p> <p>Teaching/PGCE Edgehill university module one (30 Credits) Clinical supervision (paid for by deanery free to trainee)</p> <p>National Meetings: GAT,AAGBI, ARS, DAS etc</p> <p>Leadership/management training</p> <p>Specific courses relating to Specialist Interest Areas (SIAs) e.g. POETTS course for those doing Perioperative medicine or European Trauma Course if doing Trauma + Stabilisation.</p> | <p>Courses unrelated to Stage 3 training in anaesthesia such as Altitude or Wilderness Medicine</p> <p>Multiple overseas requests</p> <p>External Interview courses not funded (as per HEE)</p> <p>Generic Instructor Course not funded by HEE.</p> <p>Masters level courses (eg Masters in Medical Education) not funded by HEE.</p> |
| <p>Post CCT</p> | <p>Sub-specialist training not necessary for the award of CCT</p> | <p>Courses relating to training required for CCT</p> |

Appendix 2 - Applying for Study Leave

Process for Applying for Study Leave for all CT and ST Trainees as per the HEE-NW Website (<https://www.nwpgmd.nhs.uk/study-leave>).

A flow chart of the process is available also (https://www.nwpgmd.nhs.uk/sites/default/files/study_leave_process_application_fs1_form_flow_chart.pdf)

1. Download the electronic application form from the above website & complete sections A, B and C ensuring you have inserted estimation of expenses you expect to claim.
2. Email your completed form to your Educational Supervisor and Rota Coordinator to obtain approval for the course / conference and the time respectively. Please note, study leave can be approved by inserting an electronic signature image into the study leave application, *or* attaching an email from the relevant individual, stating that approval has been given.
4. Your Educational Supervisor and Rota Coordinator should email you back confirmation of their approval.
5. Forward the two approval emails along with the application form to the relevant study leave administrator.
6. The study leave administrator will then forward your request to the Training Programme Director.
7. You must then await an acknowledgement from the Deanery which will be emailed to you with a study leave expenses claim form.
8. You should submit your expenses claim form to the Deanery as soon as possible after the course/ conference along with receipts.

[https://www.nwpgmd.nhs.uk/sites/default/files/Study%20Leave%20Guidelines%20final%20doc%20\(2009%20revision\).pdf](https://www.nwpgmd.nhs.uk/sites/default/files/Study%20Leave%20Guidelines%20final%20doc%20(2009%20revision).pdf)

Appendix 3: RCoA Guidance on Educational Development Time

The 2021 CCT Curriculum in Anaesthetics includes reference to the General Medical Council's 9 domains of Generic Professional Capabilities. These areas of professional practice are incorporated within domains of learning at each of the 3 stages of the curriculum. These domains are:

1. Professional Behaviours and Communication
2. Management and Professional Regulatory Requirements
3. Team Working
4. Safety and Quality Improvement
5. Safeguarding
6. Education and Training
7. Research and Managing Data

Whilst some of these domains, such as 1 and 3, will be assessed in the context of the clinical environment, others will require specific time for developing and assessing skills. In order to ensure that anaesthetists in training are able to complete these areas of training the RCoA is providing guidance for the provision of Educational Development Time (EDT) to support learning and assessment in professional practice.

The RCoA recommends that anaesthetists in training in anaesthetic posts in stages 1 and 2 of the curriculum on both core Anaesthetic training and ACCS pathways should be allocated up to 2 hours of EDT per week. Those in stage 3 should be allocated up to 4 hours per week reflecting the requirement for greater involvement in some of these areas in the later stages of the training programme.

EDT should be allocated pro rata for those in less than full-time training. In all cases it may be managed flexibly by departments and can be averaged over a period of time if desired to ensure that access is equitable. It must be discussed and planned with the educational supervisor in all cases with specific objectives to be completed. This should encompass work specific to the learning outcomes outlined in the curriculum and may include:

- educational activity and preparation of educational materials
- quality Improvement projects
- research
- management and leadership activity
- other activities which support the development of skills in these areas.

Time should be spent on site unless there are specific agreed reasons such as involvement in research projects on different sites or a lack of suitable facilities and space to support the work being undertaken. During the initial period of training when the Initial Assessment of Competence is being undertaken EDT should support this activity in areas such as simulation and tailored educational sessions.

In stage 3 of the training programme EDT may also be used to support maintenance of skills in special interest areas already undertaken by agreement with the College Tutor. However, this should be incorporated within the allowed time and not taken in addition.