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Introduction

Welcome to the Yorkshire and the Humber School of Anaesthesia. You are joining the programme based around the hospitals in South Yorkshire and North Derbyshire.

The Hospitals that form the rotation are:

- Barnsley Hospital NHSFT [www.barnsleyhospital.nhs.uk](http://www.barnsleyhospital.nhs.uk)
- Chesterfield Royal Hospital NHSFT [www.chesterfieldroyal.nhs.uk](http://www.chesterfieldroyal.nhs.uk)
- Doncaster & Bassetlaw Hospitals NHSFT [www.dbh.nhs.uk](http://www.dbh.nhs.uk)
- Rotherham Hospital NHSFT [www.rotherhamhospital.nhs.uk](http://www.rotherhamhospital.nhs.uk)
- Sheffield Children’s Hospital NHSFT [www.sheffieldchildrens.nhs.uk](http://www.sheffieldchildrens.nhs.uk)
- Sheffield Teaching Hospitals NHSFT [www.sth.nhs.uk](http://www.sth.nhs.uk)
  Northern General Hospital
  Royal Hallamshire Hospital
  The Jessop Wing
  Weston Park Hospital

General information about each hospital can be found on their individual website and the [Deanery website](http://www.sheffieldchildrens.nhs.uk).
Useful Contacts (July 2011)

Training Programme Director (ST3/4 and ST5-7)
- Dr Iain Dods  iain.dods@chesterfieldroyal.nhs.uk  01246512284

Deputy Programme Director (Core training)
- Dr Jon Clark  jon.clark@rothgen.nhs.uk  01142434343

Regional Education Adviser
- Dr Gill Hood  gillian.hood@sth.nhs.uk  01142434343

Less than full time Co-ordinator
- Dr Ruth Groves  ruth.groves@sth.nhs.uk  01142711900

Regional Adviser - Intensive Care Medicine
- Dr Danielle Bryden  danielle.bryden@sth.nhs.uk  01142434343

Regional Adviser - Pain Medicine
- Dr Nick Plunkett  nick.plunkett@sth.nhs.uk  01142711900

Programme Administrator
Mr Andrew Ford  andrew.ford@sth.nhs.uk  01142712381

Speciality / College Tutors

Barnsley Hospital NHSFT
- Dr Tim Wenham  t.wenham@nhs.net  01226 730000

Chesterfield Royal Hospital NHSFT
- Dr Sarah Capper  sarah.capper@chesterfieldroyal.nhs.uk  01246512284
- Dr Tim Meekings  tim.meekings@chesterfieldroyal.nhs.uk

Doncaster & Bassetlaw Hospitals NHSFT
- Dr Jonathan Allen  jonathan.allen@dbh.nhs.uk  01302 366666

Northern General Hospital
- Dr Sumayer Sanghera  sumayer.sanghera@sth.nhs.uk  01142434343

Royal Hallamshire Hospital
- Dr Andrew Davidson  andrew.davidson@sth.nhs.uk  01142711900

Sheffield Children’s Hospital NHSFT
- Dr Elaine Wilson-Smith  elaine.wilson-smith@sch.nhs.uk  01142717000

Rotherham Hospital NHSFT
- Dr Clare Smith  clare.smith@rothgen.nhs.uk  01709307816
The Training Programme

The training programme within the rotation has been set up to cover the 2010 curriculum of the Royal College of Anaesthetists. This is a GMC approved curriculum upon completion of both intermediate and higher levels a CCT (or CESR (CP)) may be awarded. The award of either completion certificate depends upon an individual training background and upon obtaining the required competencies. Further details can be found on the RCoA website or through the Training Programme Director or Regional Educational Advisor.

On your appointment to the specialist registrar training programme you will have to apply for a national training number (NTN) from the postgraduate dean (PGD). The purpose of this is:

- passport for the trainee: As long as the NTN is held the trainee has, subject to acceptable performance a guarantee of a continued place in a CCT training programme for the speciality to which that NTN relates.

- educational planning and management: tracking STs by the PGD. The NTN is an integral part of the Annual Review of Competency Progression (ARCP).

- financial planning and management in deaneries

- workforce planning and management

You can only hold one NTN at one time apart from time out of the anaesthetic programme to do the dual CCT in Intensive care medicine when your anaesthetic number is kept alongside an ITU number.

ST5-7 training allows further the development of skills acquired during previous levels of training (higher training) and the acquisition of new skills and interests in preparation for independent Consultant practice (advanced training).

In addition to clinical modules, general competencies are developed are developed in:

- Academic and Research (inc. Audit)
- Teaching and Learning
- Management

Many of these skills are competencies are obtained during the course of a normal post but should be recorded in your portfolio. Mandatory Deanery and external courses supplement this learning and should be booked early.

By the end of ST7, trainees who have completed the programme of training successfully should demonstrate the following in their chosen area of practice within anaesthesia, intensive care and pain medicine:

- The communication, decision making, clinical reasoning and clinical leadership skills required to engage appropriately with colleagues in all specialties to provide high quality safe and effective clinical care in all aspects of practice in their chosen area within anaesthesia, intensive care and pain medicine
- The ability to teach, supervise and assess trainees
- The ability to design, complete and evaluate audits related to their chosen special interest area[s] of practice.

**Training in Intensive Care Medicine**

If you are considering a career in Intensive Care Medicine, then the documents used by The Faculty of Intensive Care Medicine (IBTICM) should be used. Download them [here](http://www.ficm.ac.uk/for-trainees/assessments.ashx).

Advice about a career in ICM should be sought from the Training Programme Director for Intensive Care Medicine or the local ICM trainer within each hospital.

Training Programme Director for ICM

Dr Andy Temple andy.temple@sth.nhs.uk 01142434343
Higher Training

The 2010 curriculum contains a number of prescribed elements that are required to be completed at a higher level of training during the course of 3 years training. Each module requires the acquisition of a ‘minimum learning outcome’ evidenced by completion of appropriate work place assessments, reflective practice, multi-source feedback and a logbook.

These are:

- Anaesthesia for neurosurgery, neuroradiology and neurocritical care
- Cardiac/Thoracic
- General duties (8 modules minimum inc. Essential*)
  - Airway management*
  - Day surgery
  - ENT, Maxillo-facial and dental
  - General, urological and gynaecological surgery
  - Management of respiratory and cardiac arrest*
  - Non-theatre
  - Obstetrics
  - Orthopaedic
  - Regional
  - Sedation
  - Transfer medicine
  - Trauma and stabilisation
  - Vascular surgery

- Intensive care medicine
- Paediatrics

There are a number of additional training modules which may be taken subject to local training capacity and availability:

Optional Units

- Pain medicine
- Ophthalmic
- Plastics/Burns
- Anaesthesia in developing countries
- Conscious sedation in dentistry
- Military anaesthesia
- Remote and rural anaesthesia

As of date, a pre-hospital care module is being developed by the RCoA but has yet to be fully approved as part of the curriculum.

It is anticipated that each trainee will undergoing at least 12 months of general training in addition to the sub-specialties. Each module is 3 months in duration.
It is necessary to actively manage your career to ensure all the required elements are undertaken especially if you wish to undergo advance training in any field.

Advice should be sought from the Training Programme Director and Speciality tutors on how best to do this.

Although, each placement is designed to optimise the training opportunities for a trainee, it remains the responsibility of the trainee to ensure that they utilise them fully. This can be best achieved through the use of self-directed learning outside of the workplace and e-learning


It is also the responsibility of the trainee to monitor your own training and liaise with their educational supervisors should your training needs not be met.

Advanced Training

At the end of higher training the trainee will be competent in all aspects of anaesthesia practice to that level and will have experience of most procedures and techniques.

Trainees will not have had an opportunity to develop special skills in an area of practice.

Advanced training allows mastery of specialised, uncommon and difficult clinical work that has been experienced at a higher level. It is limited to a maximum of twelve months and can be undertaken in one sub-speciality or broken in to 2 modules of around 6 months. The exact nature and availability of the blocks should be arranged with the training programme director.

Advanced training is the final preparation for independent practice and will normally occur in ST year 6-7. It prepares a trainee for independent Consultant practice and allows development of specific interests.

Trainees who intend to obtain a post in a non-specialist hospital, without a commitment to ICM, should complete six months to a year of advanced general duties incorporating the appropriate units of training to suit their aspirations for independent consultant practice.

The eight advanced ‘units of training’ are:

- Anaesthesia for neurosurgery, neuroradiology and neurocritical care
- Cardiothoracic
  - General duties
    - Airway management
    - Anaesthesia for hepatobiliary surgery
    - Day surgery
    - General, urology and gynaecology
    - ENT, maxillo-facial and dental
    - Orthopaedics
    - Ophthalmic
    - Regional
Workplace Assessments

The following sections should be read in conjunction with the CCT in Anaesthesia [2010 Curriculum], which is subject to periodic updates. The latest version is available here and updates available here.

http://www.rcoa.ac.uk/index.asp?PageID=1479
http://www.rcoa.ac.uk/index.asp?PageID=1483

Assessment in the workplace forms the basis of a 'craft' speciality like anaesthesia. The assessments are used to be a formative part of the learning a trainee requires to complete a module. As such the workplace assessment tools should be used throughout the course of a placement to provide feedback on progression rather than a 'pass/fail' test at the end of a placement. They can be used to point out areas of excellence as well as areas that require further development.

The current tools used are:
- Multi-Source Feedback
- Direct Observation of Procedural Skills (DOPS)
- Anaesthesia-Clinical Evaluation Exercise (A-CEX)
- Case-based Discussion (CbD)
- Anaesthetic List Management Tool (ALMAT)

Completion of these assessments provides the information that allows the modules to be signed off that make up the intermediate level training.

A checklist of the modules required is included within this document with pre-printed forms to make it easier for you to plan your training. (Appendix A)

Please refer to the relevant section of the curricula document for the up to date core learning outcomes.
Educational Supervision and Clinical Supervision

Each hospital within the rotation has at least 1 or more Speciality Tutors or College Tutors who co-ordinate the educational supervision within their department.

At the start of each placement, you will be allocated an educational supervisor who will meet up with you and agree learning objectives for the whole placement. This will cover not only the clinical element of your training but also development in areas such as audit, governance, research, teaching and management. It would be unreasonable to expect all areas to be developed equally and at the same pace but it this stage of your career a broad base is necessary to allow you to fully explore the variety of career options available.

Examination plans and study leave will also be discussed. Granting of study leave is subject to both local and Deanery policies. In general, study leave external to the Yorkshire and the Humber Deanery is granted only if no equivalent course is available within the Deanery or if the trainee has particular educational needs. The latter is granted at the discretion of the Postgraduate Dean who may seek advice from the Training Programme Director.

The Deanery study leave policy can be found [here](#).

Further formal meetings are held at the midpoint and end of the placement. Additional meetings can be arranged at any time by mutual agreement.

At the final meeting, the educational supervisor will comply a report on your progress based upon the evidence in your portfolio. In general, it is better to provide the portfolio prior to the meeting so it can be reviewed fully. This allows feedback to be given appropriately by both parties.

A signed and completed copy of the educational supervisors report should be placed in your portfolio. A further copy should be held by your educational supervisor. It is also recommended that copies of completed modules and educational supervisors reports should be sent to the Training Programme Director (ST5/7) either as paper copies or *.pdf files (in case of loss of portfolio!) unless an e-portfolio is in use.

Clinical supervisors provide the day-to-day supervision of the clinical work and training received by a trainee. Most are trained in the use of workplace assessment tools and will be willing to complete the assessment upon request. It is necessary to be proactive in seeking out opportunities to complete the assessments. They should also be filled out prospectively rather than retrospectively. Senior trainees and other members of the multidisciplinary team can complete assessments but some should be from Consultants.

The roles and responsibilities of both trainee and trainer are laid out in the Training Agreement that should be signed at the start of each placement. A copy of this should be placed in your portfolio.
Annual Review of Competence Progression (ARCP)

The ARCPs are held 4 times a year in January, April, July and December. They are usually held on Tuesdays and Wednesdays.

Your annual ARCP will fall in whichever month is nearest your start date on the programme. You will be sent a letter 2-3 weeks prior informing you of a date and time.

You will be required to fill in an information form detailing what clinical modules you have done in the last year and what you have achieved e.g. audit, CME, research, exams etc, in the last year. This should be returned to the Deanery office at least 48 hours prior to your ARCP.

You will be expected to bring an up to date portfolio and logbook to your ARCP.

The ARCP panel will compose of a chairperson (Training Programme Director) and College Tutors; an Associate Postgraduate Dean and / or lay representative may be present to fulfil to requirements laid out in the Gold guide.

The evidence presented in the portfolio determines the outcome of the ARCP.

Although it is not mandatory for most trainees, the past experience of trainees and trainers is that it useful for the trainee to attend the panel. While the portfolio is being assessment, an appraisal can take place with the panel to help guide your training for the next year or beyond. It also provides an opportunity for you to give feedback on the training you receive.

If you choose not to attend the panel, then you should arrange an appraisal with a trained appraiser at your earliest convenience. You will have the opportunity to attend the appraisal element of the process at the next ARCP day.

Failure to complete and return the form, produce an up to date portfolio, logbook or signed workplace assessments may result in an outcome 5 because of lack of evidence. Failure to produce the required evidence within 1 month may delay your CCT.

It is recommended that your educational supervisor or College Tutor review your portfolio prior to the ARCP.

In order to complete your training, you have to have satisfactorily completed all elements of the modules and the mandatory courses (or equivalent).
Portfolios
All trainees are required to keep an up to date portfolio. This should encompass what the trainee has achieved in all areas of their career. All portfolios should have the following parts:

1. Personal details:
   a. up to date curriculum vitae

2. Clinical skills:
   a. up to date log book summary; up to date log book breakdown e.g. speciality, ASA grade etc. Please include a summary of each placement in addition to an annual summary.
   b. *You need to keep a log book of cases seen and procedures done on ITU*

3. Audit:
   a. set up, participated in, presented, closed audit loop.

4. Research:
   a. papers, publications

5. Teaching and presentations:
   a. informal and formal teaching, departmental presentations etc. Please include an annual summary sheet.

6. Education:
   a. continuing medical education and professional development, internal and external study leave. Please include an annual summary sheet.

7. Clinical practice:
   a. feedback from patients, staff, colleagues
   b. reflective practice

8. Appraisal:
   a. evidence of appraisal for each module
   b. educational supervisors reports

9. Assessment:
   a. workplace assessment forms;
   b. copies of ARCP documentation
   c. training agreement for each placement

10. Correspondence:
    a. official documentation
    b. GMC / Deanery Survey

11. Special interests

12. Health and Probity Declaration
    a. Annual declarations in both domains
It is recommended that copies of certificates e.g. Fellowship are kept in the folder and the originals held safely elsewhere.

**No patient information or identifiers should be held within any documentation held in the portfolio. Failure to adhere to this policy will result in a written warning and / or referral to the GMC.**

If in any doubt, obscure, delete or leave out the information.

It is likely that an e-portfolio will be phased in during your training. Further details will be given closer to the time.
Training Committees

Committee of Anaesthetists in training (CAT)

It is run for and by trainee anaesthetists. It has existed in Sheffield for 25 years or more and is a forum for trainees to meet to discuss training and meet socially. The Chairperson is usually a senior trainee, the secretary from any of the years. The Chairperson sits on the Education and Allocation Committees. Meetings are held every one or two months. The programme directors attend a CAT meeting 2 or 3 times a year to discuss developments and get direct feedback from the trainees.

www.sheffieldcat.org.uk
chair@sheffieldcat.org.uk

Specialty Training Committee

The STC meets once every 3-4 months.

It is chaired by the Training Programme Director and consists of Programme Directors, Regional Advisor, Regional Advisor (ICM), Regional Advisor (Pain Medicine), all the college tutors, primary and final course organisers, and a trainee representative usually the CAT chairperson. Other members are co-opted as necessary. Requests for attendance should be addressed to the Chairperson or programme secretary.

This is the forum where all training issues in the School of Anaesthesia are discussed and recommendations for the implementation of training across the programme are made.

Allocation Committee

The allocation committee is the forum where modules are allocated to ST5/6/7 trainees. It meets twice a year (Jan and July). The committee is made up of the RA, Programme directors, Chairman of the Education Committee, trainee representative (usually CAT Chairperson) and district general hospital representatives. All college tutors are invited if they wish to come.

ST5-7 trainees are able to request placements to develop their clinical interests but must also complete the compulsory modules laid out in the curriculum.

Career Advice

Developing a career post-FRCA can be a daunting task as many trainees have found. It is wise to seek advice from experienced Consultants, College Tutors and Training Programme Director early. The 2010 curriculum’s concept of ‘spiral learning’ means that deciding on a career path should be done early in the 3 years of higher training to allow advanced training to take place in the remaining time. Often trainees know what they don’t want to do rather
than actively pursuing a path. It is generally recommended that those compulsory modules that are undertaken first to allow time for guidance to be sought. Don’t leave it until the last minute.

**Less than Full time training**

Initial discussions for those thinking of applying for less than full time training should be directed to the training programme director and the less than full time co-ordinator.

If you are considering LTFT, then you should arrange an appointment to discuss matters with the Associate Postgraduate Dean with responsibility for LTFT. The Trainee is responsible for the completion of the appropriate application but assistance is available from the LTFT co-ordinator and / or training Programme Director

If approved, the Training Programme Director will be asked to give a date upon which the trainee can start their LTFT programme. This date will depend upon the availability of an appropriate slot and may not occur until some months after Deanery approval. It is, therefore, wise to involve the training programme director and LTFT co-ordinator at all times.

It is sometimes necessary to repeat parts of training to allow a slot share to occur.

**Out of Programme training / experience (OOPT / OOPE)**

Out of programme training and experience can only be taken after successful completion of intermediate level training and it usually undertaken in ST6. As there is limited capacity for OPPT / OOPE, it is best to discuss your intentions early in your programme. This will allow planning of the 'gap' created within the programme by the OOPT / OOPE. It takes at least 6 months to complete the required paperwork.

Further details can be seen in the relevant section of the Gold Guide but it should be noted that the trainee should plan to return to programme at least 6 months prior to the end of their training. This allows sufficient time to organise an ARCP and allow the paperwork for issuing of a CCT to proceed without a delay in dates.

**GMC / Deanery Surveys**

On occasion you will be asked to complete surveys by the GMC and the Deanery. These are important parts of the quality management of training and are a compulsory part of your training contract. They should be answered honestly in line with the guidance contained within Good Medical Practice.


In addition, the programme or trainees in it may ask you to complete surveys to improve training or clinical services within the programme. These surveys are not compulsory but provided useful information to improve your training. It would be much appreciated if you would complete the survey. Your data is confidential and is held securely.
Employment Matters

Annual leave, claims for expenses and matters related to your term and conditions of employment are administered through the lead employer, Sheffield Teaching Hospitals Medical Personnel. Administrative support is available through each anaesthetic department.

STH personnel can be contacted on 0114 226 6886.

European Working Time Directive

Each trust endeavours to run a compliant rota. On occasion, you may be asked to work outside the normal 48 hour week. You should be aware that you are under no obligation to do so and that you are still bound by the EWTD that limits your total hours unless you choose to 'opt out'.

As a result of the extra work, you may find your training opportunities reduced as a consequence. It remains the responsibility of the trainee to ensure any training missed is made up at a later stage. An ARCP panel will not take extra duties in to account for failure to show progression.

Any issues related to service should first be directed locally to the service organiser and the College tutor.

Fatigue, Health and EWTD

It is beyond the realm of this document to cover all the issues around safe working related the medicine and shift patterns.

However, recognised techniques to minimise sleep disturbance (and fatigue) include:

I. Regular bedtime and wake-up time
II. Sustained adequate sleep
III. Two nights of good sleep before work period
IV. Bedroom associated with sleep (No work done there)
V. Bedroom quiet, dark and cool
VI. Avoid heavy eating and drinking before bedtime
VII. No alcohol, caffeine, nicotine close to bedtime
VIII. No exercise < 3 hours before sleep time
IX. If not asleep within 30 minutes, get up and do some relaxing activity

More detailed information can be found on the Association of Anaesthetists website and their booklet Fatigue and Anaesthetists (2004).

Bullying and Harassment

A ‘zero tolerance’ policy is in place within the programme and the Deanery. If you feel that you have been subjected to bullying and harassment, please discuss this with a trusted senior doctor in the workplace or contact the training programme director / Deanery.

Many issues can be resolved at a Trust level to the satisfaction of all parties. The Deanery’s policy and process for handling issues can be found here.

http://www.yorksandhumberdeanery.nhs.uk/policies/bullying.aspx

Health Issues

Anaesthesia is a stressful speciality within a profession that is itself often stressful. On occasions, you may find it difficult to cope with the rigors of shift work, exam and training pressures; and family life. It is important to realise that you will not be the first person to have had these issues and that there are people around you who can help. Do not try to solve the problems alone. Share the issues with a family member, friend, trusted colleague, programme director or anyone!

Sharing the problem helps one start to gain some perspective and to begin to work out ways to solve it.

If the problem is training related, then the College tutor can be approached or another senior colleague. The Committee of Anaesthetists in training is another portal to which you may turn.

The Programme Directors and Regional Advisors doors are always open to provide assistance and advice.

It is important to remember that these stresses can start to impinge upon your clinical performance and hence patient safety. The duty of all doctors is to protect the patient. If you feel you cannot discuss your issues with the people around you or your GP then there are resources available to help. Please use these confidential services.

BMA Doctors for Doctors  http://www.bma.org.uk/doctors_health/index.jsp
AAGBI Members wellbeing  http://www.aagbi.org/memberswellbeing.htm
The Sick Doctors Trust  http://www.sick-doctors-trust.co.uk/
Summary

I hope the information contained within this document proves useful. If you have any comments to improve it or you find any factual or typographical errors, please let me know.

I hope you enjoy your higher training and are able to harness the opportunities available within the programme not only to obtain a CCT but also develop towards a successful Consultant appointment.

Dr Iain Dods
Training Programme Director
APPENDIX A

1. Programme Training Agreement
2. Health Declaration
3. Probity Declaration
4. Checklist for Intermediate Level Modules
5. Pre – printed Intermediate Level Modules
Yorkshire and the Humber Deanery School of Anaesthesia  
(Sheffield Locality)

TRAINING AGREEMENT

Departmental Responsibilities

1. The Department of Anaesthesia aims to provide appropriate training for your level of training, relevant to the clinical workload at this hospital. This may include theatre, day surgery, critical care, outpatient and in-patient work. We undertake to provide appropriate clinical supervision at all times.

2. The College Tutor will arrange an educational supervisor for all trainees.

3. The educational supervisor will organise regular appraisal sessions with each trainee. These will usually take place at the beginning, middle and end of the attachment.

4. An educational development plan will be made as part of the appraisal process.

5. The College Tutor will be responsible for organising / coordinating assessment and multisource feedback.

6. All Consultants will perform clinical supervision as appropriate.

7. All Consultants will be involved in assessing trainees including the use of current workplace assessment tools.

8. All Consultants are committed to provide tuition and clinical supervision as appropriate.

9. Access to educational resources will be available support personal development.

10. Whenever possible, trainees will be released to attend formal teaching.
Trainee Responsibilities

The Department expects the trainees to undertake the following activities:

1. Maintain the professional standards laid out in Good Medical Practice at all times
2. Take an active part in the training programme
3. Participate fully in appraisal, assessment and annual review
4. Agree to a training plan with an educational supervisor
5. Inform the College Tutor and Service Organiser if their educational needs are not being met.
6. Give adequate notice of out-of-work place study time
7. Make the best use of research / study time
8. Agree to take part in the training of others as appropriate
9. Attendance at formal teaching provided is expected when you are released from clinical duties to do so.
10. Participate in contractual requirement to complete Doctor's hours monitoring forms and return by due date.
11. Complete surveys as required by the Programme, Deanery or GMC
12. Work within the current working time directive and inform the department if, under exceptional circumstances, you are required to work beyond it.

Signature (College Tutor / Educational Supervisor) Date:

Signature (Trainee) Date:
Higher Level 2010 - Compulsory Modules

The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ____________________________________________________________

GMC number ___________  College Reference Number ___________

Unit of Training: **Anaesthesia for neurosurgery, neuroradiology and neurocritical care**

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed:_________________________  Name (Print):_________________________  Date:____________
(Clinical Supervisor)

Signed:_________________________  Name (Print):_________________________  Date:____________
(Trainee)
The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ____________________________________________________________

GMC number ___________________________ College Reference Number ____________

Unit of Training: ____________________________

Cardiac / Thoracic

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed: ____________________________ Name (Print): ____________________________ Date: ______________
(Clinical Supervisor)

Signed: ____________________________ Name (Print): ____________________________ Date: ______________
(Trainee)
## Completion of Unit of Training

**Trainee:** __________________________________________

<table>
<thead>
<tr>
<th>GMC number</th>
<th>College Reference Number</th>
</tr>
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</table>

### General Duties - Airway Management

#### Assessments
Has the trainee completed successfully an appropriate number of WPBA?  
Yes [ ] No [ ]

#### Log book Review
Is the case mix, complexity and numbers appropriate for the level of training?  
Yes [ ] No [ ]

#### Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF)  
Yes [ ] No [ ]

#### Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes?  
Yes [ ] No [ ]

### Comments

Signed: __________________________ Name (Print): __________________________ Date: ______________
(Clinical Supervisor)

Signed: __________________________ Name (Print): __________________________ Date: ______________
(Trainee)
Higher Level 2010 - Compulsory Modules

The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ____________________________________________________________

GMC number _____________________ College Reference Number __________

Unit of Training: **General Duties - Day Surgery**

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed: ___________________________ Name (Print): ______________________ Date: __________
(Clinical Supervisor)

Signed: ___________________________ Name (Print): ______________________ Date: __________
(Trainee)
The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ______________________________________________________________________

GMC number __________________________ College Reference Number __________________________

Unit of Training: **General Duties - ENT, maxillo-facial & dental**

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed: __________________________ Name (Print): __________________________ Date: ____________
(Clinical Supervisor)

Signed: __________________________ Name (Print): __________________________ Date: ____________
(Trainee)
The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: __________________________________________

GMC number ____________ College Reference Number ____________

Unit of Training: **General Duties - General, urological and gynaecological surgery**

Assessments

Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review

Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback

Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes

Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

________________________

Signed: __________________________ Name (Print): __________________________ Date: ____________

(Clinical Supervisor)

________________________

Signed: __________________________ Name (Print): __________________________ Date: ____________

(Trainee)
Completion of Unit of Training

Trainee: ____________________________________________

GMC number ____________ College Reference Number ____________

Unit of Training: **General Duties - Management of respiratory and cardiac arrest**

Assessments
Has the trainee completed successfully an appropriate number of WPBA?  Yes □ No □

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training?  Yes □ No □

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF)  Yes □ No □

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes?  Yes □ No □

Comments

Signed: ___________________________ Name (Print): ___________________________ Date: ____________
(Clinical Supervisor)

Signed: ___________________________ Name (Print): ___________________________ Date: ____________
(Trainee)
The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ____________________________________________________________

GMC number ______________________ College Reference Number __________________

Unit of Training: **General Duties - Non - theatre**

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed: __________________________ Name (Print): __________________________ Date: __________
(Clinical Supervisor)

Signed: __________________________ Name (Print): __________________________ Date: __________
(Trainee)
Completion of Unit of Training

Trainee: ________________________________________________________________

GMC number ____________ College Reference Number ____________

Unit of Training: **General Duties - Obstetrics**

Assessments
Has the trainee completed successfully an appropriate number of WPBA?  Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training?  Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF)  Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes?  Yes ☐ No ☐

Comments

Signed: __________________________ Name (Print): __________________________ Date: ____________
(Clinical Supervisor)

Signed: __________________________ Name (Print): __________________________ Date: ____________
(Trainee)
Higher Level 2010 - Compulsory Modules

The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ____________________________________________________________

GMC number ____________________________ College Reference Number __________________________

Unit of Training: **General Duties - Orthopaedics**

Assessments

Has the trainee completed successfully an appropriate number of WPBA?  Yes [ ]  No [ ]

Log book Review

Is the case mix, complexity and numbers appropriate for the level of training?  Yes [ ]  No [ ]

Multi-source Feedback

Has a MSF been satisfactorily completed? (Only for units of training requiring MSF)  Yes [ ]  No [ ]

Minimum clinical learning outcomes

Has the trainee demonstrated achievement of the minimum clinical learning outcomes?  Yes [ ]  No [ ]

Comments

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The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ________________________________________________________________

GMC number _______ College Reference Number _______

Unit of Training: **General Duties - Regional**

Assessments
Has the trainee completed successfully an appropriate number of WPBA?  Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training?  Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF)  Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes?  Yes ☐ No ☐

Comments

Signed: ___________________________ Name (Print): __________________________ Date: ____________
(Clinical Supervisor)

Signed: ___________________________ Name (Print): __________________________ Date: ____________
(Trainee)
Completion of Unit of Training

Trainee: ________________________________

GMC number: _______________ College Reference Number: _______________

Unit of Training: **General Duties - Sedation**

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes [ ] No [ ]

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes [ ] No [ ]

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes [ ] No [ ]

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes [ ] No [ ]

Comments

Signed: ___________________________ Name (Print): ___________________________ Date: ___________
(Clinical Supervisor)

Signed: ___________________________ Name (Print): ___________________________ Date: ___________
(Trainee)
The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ________________________________________________________________

GMC number ____________________ College Reference Number ____________

Unit of Training: **General Duties - Transfer medicine**

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed: ___________________________ Name (Print): __________________________ Date: __________
(Clinical Supervisor)

Signed: ___________________________ Name (Print): __________________________ Date: __________
(Trainee)
The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: __________________________________________

GMC number: ____________ College Reference Number: ____________

Unit of Training: **General Duties - Trauma and stabilisation**

**Assessments**
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

**Log book Review**
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

**Multi-source Feedback**
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

**Minimum clinical learning outcomes**
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

**Comments**

Signed: __________________________ Name (Print): __________________________ Date: ____________
(Clinical Supervisor)

Signed: __________________________ Name (Print): __________________________ Date: ____________
(Trainee)
Completion of Unit of Training

Trainee: ________________________________________________________________

GMC number ___________________ College Reference Number __________________

Unit of Training: **General Duties - Vascular surgery**

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed: __________________________ Name (Print): __________________________ Date: ____________
(Clinical Supervisor)

Signed: __________________________ Name (Print): __________________________ Date: ____________
(Trainee)
Higher Level 2010 - Compulsory Modules

The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ________________________________________________________________

GMC number _________ College Reference Number _________

Unit of Training:  

Intensive Care Medicine

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes □ No □

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes □ No □

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes □ No □

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes □ No □

Comments

__________________________________________________________

Signed: ___________________________ Name (Print): __________________________ Date: ____________

(Clinical Supervisor)

__________________________________________________________

Signed: ___________________________ Name (Print): __________________________ Date: ____________

(Trainee)
The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ____________________________________________________________

GMC number __________ College Reference Number __________

Unit of Training: Paediatrics

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed: __________________________ Name (Print): __________________________ Date: __________
(Clinical Supervisor)

Signed: __________________________ Name (Print): __________________________ Date: __________
(Trainee)
The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ____________________________________________

GMC number: _____________ College Reference Number: _____________

Unit of Training: Optional Anaesthesia in Developing Countries

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed: ____________________________ Name (Print): ____________________________ Date: ____________
(Clinical Supervisor)

Signed: ____________________________ Name (Print): ____________________________ Date: ____________
(Trainee)
The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ____________________________________________

GMC number ________________ College Reference Number ________________

Unit of Training: Optional Conscious sedation in dentistry

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed:___________________________ Name (Print):_________________________ Date:____________
(Clinical Supervisor)

Signed:________________________ Name (Print):________________________ Date:____________
(Trainee)
Higher Level 2010 - Optional Modules

The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ________________________________________________________________

GMC number __________ College Reference Number __________

Unit of Training: **Optional** Military anaesthesia

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed: __________________________ Name (Print): __________________________ Date: __________
(Clinical Supervisor)

Signed: __________________________ Name (Print): __________________________ Date: __________
(Trainee)
The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ____________________________________________________________

GMC number: ___________ College Reference Number: ______________

Unit of Training: **Optional Ophthalmic**

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed:____________________________ Name (Print):________________________ Date:____________
(Clinical Supervisor)

Signed:___________________________ Name (Print):_________________________ Date:____________
(Trainee)
Completion of Unit of Training

Trainee: ____________________________________________________________

GMC number  ___________________________ College Reference Number  ___________________________

Unit of Training:  Optional  Pain medicine

Assessments
Has the trainee completed successfully an appropriate number of WPBA?  Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training?  Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF)  Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes?  Yes ☐ No ☐

Comments
________________________________________________________________________

Signed: ___________________________ Name (Print): ___________________________ Date: ___________
(Clinical Supervisor)

Signed: ___________________________ Name (Print): ___________________________ Date: ___________
(Trainee)
Completion of Unit of Training

Trainee: ____________________________________________

GMC number ____________ College Reference Number ____________

Unit of Training:  **Optional**  **Plastics / Burns**

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed: ____________________________ Name (Print): ____________________________ Date: __________
(Clinical Supervisor)

Signed: ____________________________ Name (Print): ____________________________ Date: __________
(Trainee)
Completion of Unit of Training

Trainee: ________________________________________________

GMC number _______________ College Reference Number _______________

Unit of Training: **Optional** Remote and rural anaesthesia

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed: __________________________ Name (Print): __________________________ Date: __________
(Clinical Supervisor)

Signed: __________________________ Name (Print): __________________________ Date: __________
(Trainee)
# Blueprint of workplace based assessments mapped against the higher level units of training

<table>
<thead>
<tr>
<th>Unit of Training</th>
<th>ACAT</th>
<th>A-CEX</th>
<th>ALMAT</th>
<th>CBD</th>
<th>DOPS</th>
<th>I-CEX</th>
<th>MSF</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Essential units</strong></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Anaesthesia for neurosurgery, neuroradiology and neurocritical care</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Cardiothoracic anaesthesia and cardiothoracic critical care</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<td>Airway management</td>
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<tr>
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<td>✓</td>
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<td>Remote and rural</td>
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</table>
2010 Anaesthesia Curriculum Higher Training Modules Checklist

Please refer to the RCoA website for up to date information on the evidence needed in order to complete the modules.

**Essential Units**

<table>
<thead>
<tr>
<th>Unit</th>
<th>Completed</th>
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<tbody>
<tr>
<td>Anaesthesia for neurosurgery, neuroradiology and neurocritical care</td>
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<tr>
<td>Cardiac/Thoracic</td>
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<tr>
<td>General duties (8 modules minimum inc. essential</td>
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<tr>
<td>- Airway management*</td>
<td></td>
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<tr>
<td>- Day surgery</td>
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<tr>
<td>- ENT. Maxillo-facial and dental</td>
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<tr>
<td>- General, urological and gynaecological surgery</td>
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<tr>
<td>- Management of respiratory and cardiac arrest*</td>
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<tr>
<td>- Non-theatre</td>
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<tr>
<td>- Obstetrics</td>
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<td>- Orthopaedic</td>
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<td>- Regional</td>
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<td>- Sedation</td>
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<td>- Transfer medicine</td>
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<td>- Trauma and stabilisation</td>
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<td>- Vascular surgery</td>
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<td>Intensive care medicine</td>
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<td>Paediatrics</td>
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**Optional Units**

<table>
<thead>
<tr>
<th>Unit</th>
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<tbody>
<tr>
<td>Pain medicine</td>
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<td>Ophthalmic</td>
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<td>Plastics/Burns</td>
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<td>Anaesthesia in developing countries</td>
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<td>Conscious sedation in dentistry</td>
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<td>Military anaesthesia</td>
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<tr>
<td>Remote and rural anaesthesia</td>
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</tbody>
</table>

*essential module
The Royal College of Anaesthetists

Completion of Unit of Training

Trainee: ______________________________________________________________________

GMC number __________ College Reference Number __________

Unit of Training: ______________________________________________________________________

Assessments
Has the trainee completed successfully an appropriate number of WPBA? Yes ☐ No ☐

Log book Review
Is the case mix, complexity and numbers appropriate for the level of training? Yes ☐ No ☐

Multi-source Feedback
Has a MSF been satisfactorily completed? (Only for units of training requiring MSF) Yes ☐ No ☐

Minimum clinical learning outcomes
Has the trainee demonstrated achievement of the minimum clinical learning outcomes? Yes ☐ No ☐

Comments

Signed: __________________________ Name (Print): __________________________ Date: __________
(Clinical Supervisor, Educational Supervisor or College Tutor)

Signed: __________________________ Name (Print): __________________________ Date: __________
(Trainee)
The Royal College of Anaesthetists

Notification of Completion of Training

This form is only to be used for those trainees who are expected to complete their higher training for the award of a Certificate of Completion of Training [CCT] Certificate of Eligibility for Specialist Registration [Combined Programmes] [CESR[CP]] within four months. It must be completed in BLOCK CAPITALS

Personal Details

<table>
<thead>
<tr>
<th>Surname</th>
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<table>
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<tr>
<th>Forenames</th>
<th>Sex</th>
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Permanent Address for Correspondence:

<table>
<thead>
<tr>
<th>Town:</th>
<th>County:</th>
<th>Postcode:</th>
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Daytime Telephone Number: ___________________________

Email Address: ___________________________

Date of Birth ___________________________

NTN ___________________________

GMC Number ___________________________

College Reference Number ___________________________

Fellowship

FRCA ☐ FCARCSI ☐

Date of Award M M Y Y Y Y Y

Medical Qualifications

<table>
<thead>
<tr>
<th>Primary Medical Qualification</th>
<th>Country Obtained</th>
<th>City Obtained</th>
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<tr>
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</table>
**Postgraduate Professional Training (Please complete in full)**

Please list in chronological order all the basic, intermediate, higher and advanced posts which are being credited towards the CCT/CESR[CP]. Include periods of training in research, overseas, LAT, FTTA if they are being credited towards the CCT/CESR[CP].

<table>
<thead>
<tr>
<th>Grade/Title of Post</th>
<th>Commencement and completion dates DD/MM/YY</th>
<th>Fulltime/Flexible (% of WTE for Flexible)</th>
<th>Permanent/LAT/FTTA</th>
<th>Name of Hospital or Medical School</th>
<th>Content of Training (Please list all modules of training undertaken)</th>
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### Postgraduate Professional Training Continued (Continue on another sheet if necessary)

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<th>Fulltime/Flexible (% of WTE for Flexible)</th>
<th>Permanent/LAT/FTTA</th>
<th>Name of Hospital or Medical School</th>
<th>Content of Training (Please list all modules of training undertaken)</th>
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</table>
Completion of training

I confirm that the details given are an accurate reflection of my training programme in anaesthesia, critical care and pain medicine.

Trainees Signature: ……………………………………………………………………..  Date: ………………………………

Endorsement by Programme Co-ordinator*

I confirm that the above doctor has undergone and passed all the required assessments and has achieved as a minimum the core clinical learning outcomes for the award of a Certificate of Completion of Training or the Certificate of Eligibility for Specialist Registration [Combined Programmes] in Anaesthetics. I will notify the Royal College of Anaesthetists Training Directorate if there is any change to this confirmation between now and the formal completion of training.

The date of completion of training will be: DD MM YYYY

Programme Co-ordinator*

Name (Block Capitals): ……………………………………………………………………………………………………………………………..

Signature: ……………………………………………………………………..  Date: …………………………..

* The Programme Co-ordinator will be the Regional Adviser or Training Programme Director (or their appointed deputies)

Once this notification form has been completed and signed, please forward the form to:

Miss Claudia Moran
Senior Training Administrator
Training and Examinations Directorate
The Royal College of Anaesthetists
Churchill House
35 Red Lion Square
London WC1R 4SG

Direct Line: 020 7092 1554
E-mail: cmoran@rcoa.ac.uk
Training and Examinations Fax number: 020 7092 1730
NOTES ON PROBITY AND HEALTH

PROBITY

The extract below is taken from the GMC’s guidance Good Medical Practice pages 27 to 33.

Being honest and trustworthy

56 Probity means being honest and trustworthy, and acting with integrity: this is at the heart of medical professionalism.

57 You must make sure that your conduct at all times justifies your patients’ trust in you and the public’s trust in the profession.

58 You must inform the GMC without delay if, anywhere in the world, you have accepted a caution, been charged with or found guilty of a criminal offence, or if another professional body has made a finding against your registration as a result of fitness to practise procedures.

59 If you are suspended by an organisation from a medical post, or have restrictions placed on your practice you must, without delay, inform any other organisations for which you undertake medical work and any patients you see independently.

Providing and publishing information about your services

60 If you publish information about your medical services, you must make sure the information is factual and verifiable.

61 You must not make unjustifiable claims about the quality or outcomes of your services in any information you provide to patients. It must not offer guarantees of cures, nor exploit patients’ vulnerability or lack of medical knowledge.

62 You must not put pressure on people to use a service, for example by arousing ill-founded fears for their future health.

Writing reports and CVs, giving evidence and signing documents

63 You must be honest and trustworthy when writing reports, and when completing or signing forms, reports and other documents.

64 You must always be honest about your experience, qualifications and position, particularly when applying for posts.

65 You must do your best to make sure that any documents you write or sign are not false or misleading. This means that you must take reasonable steps to verify the information in the documents, and that you must not deliberately leave out relevant information.

66 If you have agreed to prepare a report, complete or sign a document or provide evidence, you must do so without unreasonable delay.
67 If you are asked to give evidence or act as a witness in litigation or formal inquiries, you must be honest in all your spoken and written statements. You must make clear the limits of your knowledge or competence.

68 You must co-operate fully with any formal inquiry into the treatment of a patient and with any complaints procedure that applies to your work. You must disclose to anyone entitled to ask for it any information relevant to an investigation into your own or a colleague’s conduct, performance or health. In doing so, you must follow the guidance in Confidentiality: Protecting and providing information.

69 You must assist the coroner or procurator fiscal in an inquest or inquiry into a patient’s death by responding to their enquiries and by offering all relevant information. You are entitled to remain silent only when your evidence may lead to criminal proceedings being taken against you.

Research

70 Research involving people directly or indirectly is vital in improving care and reducing uncertainty for patients now and in the future, and improving the health of the population as a whole.

71 If you are involved in designing, organising or carrying out research, you must:
   (a) put the protection of the participants’ interests first
   (b) act with honesty and integrity
   (c) follow the appropriate national research governance guidelines and the guidance in Research: The role and responsibilities of doctors.

Financial and commercial dealings

72 You must be honest and open in any financial arrangements with patients. In particular:
   (a) you must inform patients about your fees and charges, wherever possible before asking for their consent to treatment
   (b) you must not exploit patients’ vulnerability or lack of medical knowledge when making charges for treatment or services
   (c) you must not encourage patients to give, lend or bequeath money or gifts that will directly or indirectly benefit you
   (d) you must not put pressure on patients or their families to make donations to other people or organisations
   (e) you must not put pressure on patients to accept private treatment
   (f) if you charge fees, you must tell patients if any part of the fee goes to another healthcare professional.

73 You must be honest in financial and commercial dealings with employers, insurers and other organisations or individuals. In particular:
   (a) before taking part in discussions about buying or selling goods or services, you must declare any relevant financial or commercial interest that you or your family might have in the transaction
   (b) if you manage finances, you must make sure the funds are used for the purpose for which they were intended and are kept in a separate account from your personal finances.
Conflicts of interest

74 You must act in your patients’ best interests when making referrals and when providing or arranging treatment or care. You must not ask for or accept any inducement, gift or hospitality which may affect or be seen to affect the way you prescribe for, treat or refer patients. You must not offer such inducements to colleagues.

75 If you have financial or commercial interests in organisations providing healthcare or in pharmaceutical or other biomedical companies, these interests must not affect the way you prescribe for, treat or refer patients.

76 If you have a financial or commercial interest in an organisation to which you plan to refer a patient for treatment or investigation, you must tell the patient about your interest. When treating NHS patients you must also tell the healthcare purchaser.

HEALTH

The extract below is taken from the GMC’s guidance Good Medical Practice page 34

Health

77 You should be registered with a general practitioner outside your family to ensure that you have access to independent and objective medical care. You should not treat yourself.

78 You should protect your patients, your colleagues and yourself by being immunised against common serious communicable diseases where vaccines are available.

79 If you know that you have, or think that you might have, a serious condition that you could pass on to patients, or if your judgement or performance could be affected by a condition or its treatment, you must consult a suitably qualified colleague. You must ask for and follow their advice about investigations, treatment and changes to your practice that they consider necessary. You must not rely on your own assessment of the risk you pose to patients.

Guidance

Paragraphs 77 to 79 of Good Medical Practice above set out some of the health obligations that you should consider when signing a declaration. There are other types of obligations/information that you should also consider for example your own assessment of your health and whether there are any formal or voluntary restrictions to your practice because of illness or a physical condition. This would include any conditions imposed by an employer or contractor of your services, any proceedings under the GMC’s Health Procedures or Health Committee or similar proceedings of other professional regulatory or licensing bodies within the UK or abroad.
PROCEDURE

Forms 4A and 4B below reproduce pro formas, which the GMC has tested extensively as part of the work to develop revalidation. The pro formas are helpful tools for the collection of evidence for annual appraisal, for which, it is sufficient to provide a self-declaration about how effectively you are ensuring that your personal probity and health do not affect your fitness to practice medicine. You must disclose information that relates to your probity and/or health over the whole of your current appraisal cycle. This is the period between ARCPs

If you are able to sign both of the declarations at the beginning of each pro forma then you do not need to complete the rest of the pro forma.

If you are unable to sign a declaration then you will need to complete the full pro forma.
Form 4A: Probity Declaration

Notes:
• If you are able to sign both of the following declarations then you do not need to complete the rest of the pro-forma.
• If you are not able to sign both declarations then you will need to complete the full pro-forma.

Professional obligations

I accept the professional obligations placed upon me in paragraphs 56 to 76 of Good Medical Practice.

Signature……………………… Date……………………

Name in capitals…………………………………………………………….

Convictions, findings against you and disciplinary action

Since my last appraisal I have not, in the UK or outside:

• Been convicted of a criminal offence or have proceedings pending against me.
• Had any cases considered by the GMC, other professional regulatory body, or other licensing body or have any such cases pending against me.
• Had any disciplinary actions taken against me by an employer or contractor or have had any contract terminated or suspended on grounds relating to my fitness to practise.

Signature……………………… Date……………………

Name in capitals…………………………………………………………….
Probity declaration pro forma
(To be completed if you are unable to sign the Probity declaration)

Convictions, findings against you and disciplinary action

1. Since your last appraisal¹, have you been convicted of a criminal offence either inside or outside the UK? ☐ Yes ☐ No ☐ If yes, please give details:

...........................................................................................................................................................
...........................................................................................................................................................

2. Do you have any criminal proceedings pending against you inside or outside the UK? ☐ Yes ☐ No ☐ If yes, please give details:

...........................................................................................................................................................
...........................................................................................................................................................

3. Since your last appraisal¹, have you had any cases considered, heard and concluded against you by any of the following:
   a. The General Medical Council.
   b. Any other professional regulatory or other professional licensing body within the UK.
   c. A professional regulatory or other professional licensing body outside the UK.

☐ Yes ☐ No ☐ If yes, please give details:

...........................................................................................................................................................
...........................................................................................................................................................

¹ If this is your first appraisal then please fill in the pro-forma answering the questions as they apply to you at the current time.
4. Are there any cases pending against you with any of the following organisations:
   a. The General Medical Council.
   b. Any other professional regulatory or other professional licensing body within the UK.
   c. A professional regulatory or other professional licensing body outside the UK.

   Yes ☐ No ☐  If yes, please give brief details:

   .................................................................................................................................
   .................................................................................................................................

5. Since your last appraisal¹, have there been any disciplinary actions taken against you by your employer or your contractor – either in the UK or outside - that have been upheld:

   Yes ☐ No ☐  If yes, please give brief details:

   .................................................................................................................................
   .................................................................................................................................

6. Since your last appraisal¹, has your employment or contract ever been terminated or suspended – in the UK or abroad - on grounds relating to your fitness to practise (conduct, performance or health):

   Yes ☐  No ☐  If yes, please give details:

   .................................................................................................................................
   .................................................................................................................................

7. All the information in this declaration is true to the best of my knowledge.

   Signature………………………………………  Date…………………………

   Name in capitals……………………………………………………………………….
FORM 4B: HEALTH DECLARATION:

Notes:
- If you are able to sign both of the following declarations then you do not need to complete the rest of the pro-forma.
- If you are not able to sign both declarations then you will need to complete the full pro-forma.

Professional obligations

The GMC’s guidance Good Medical Practice and Serious communicable diseases says that if a doctor has a serious condition which they could pass on to patients or colleagues they must have any necessary tests and act on the advice given to them by a suitably qualified colleague about necessary treatment and/or modifications to their clinical practice. Moreover, if their judgement or performance could be significantly affected by a condition or illness, they must take and follow advice from a consultant in occupational health or another suitably qualified colleague on whether, and in what ways they should modify their practice.

I accept the professional obligations placed upon me in paragraphs 77 to 79 of Good Medical Practice and Serious communicable diseases.

Signature……………………………………………   Date……………………
Name in capitals………………………………………………………………

Regulatory and voluntary proceedings

Since my last appraisal I have not, in the UK or outside:

- Been the subject of any health proceedings by the GMC or other professional regulatory or licensing body.
- Been the subject of medical supervision or restrictions (whether voluntary or otherwise) imposed by an employer or contractor resulting from any illness of physical condition.

Signature……………………………………………   Date……………………
Name in capitals………………………………………………………………
Health declaration pro forma
(To be completed if your are unable to sign the Health declaration)

Your own health

The GMC acknowledges that medicine can be a demanding profession and that doctors who become ill deserve help and support. Doctors also have to recognise that illness can impair their judgement and performance and thus put patients and colleagues at risk (this is particularly so in the case of psychiatric conditions, drug and alcohol abuse). The GMC therefore encourages doctors to reflect on their own health, seek professional advice if necessary and consider whether, for health related reasons, they should modify their professional activities.

1. Do you have any illness or physical condition that has since your last appraisal resulted in your restricting or changing your professional activities?

   Yes ☐ No ☐

   If yes, please give details of the changes in your professional activities, which it is or was necessary for you make:

   …………………………………………………………………………………………………
   …………………………………………………………………………………………………
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Regulatory and voluntary proceedings

2. Are you - or have you been since your last appraisal been the subject of any proceedings under the GMC’s Health Procedures or Health Committee or similar proceedings of other professional regulatory or licensing bodies within the UK or abroad?

   Yes ☐ No ☐ If yes, please give details:

   …………………………………………………………………………………………………
   …………………………………………………………………………………………………
   …………………………………………………………………………………………………
   …………………………………………………………………………………………………

3. Are you currently or since your last appraisal been subject to medical supervision, voluntary or otherwise, and/or any restrictions voluntary or otherwise, imposed by your employer or contractor resulting from any illness or physical condition within the UK or abroad?

   Yes ☐ No ☐ If yes, please give details:

   …………………………………………………………………………………………………
   …………………………………………………………………………………………………
   …………………………………………………………………………………………………
   …………………………………………………………………………………………………

2 If this is your first appraisal then please fill in the pro-forma answering the questions as they apply to you at the current time.
4. All the information in this declaration is true to the best of my knowledge.

Signature………………………………………………………..  Date……………………

Name in capitals………………………………………………
Yorkshire and the Humber Deanery School of Anaesthesia
(Sheffield Locality)

TRAINING AGREEMENT

Departmental Responsibilities

1. The Department of Anaesthesia aims to provide appropriate training for your level of training, relevant to the clinical workload at this hospital. This may include theatre, day surgery, critical care, outpatient and in-patient work. We undertake to provide appropriate clinical supervision at all times.

2. The College Tutor will arrange an educational supervisor for all trainees.

3. The educational supervisor will organise regular appraisal sessions with each trainee. These will usually take place at the beginning, middle and end of the attachment.

4. An educational development plan will be made as part of the appraisal process.

5. The College Tutor will be responsible for organising / coordinating assessment and multisource feedback.

6. All Consultants will perform clinical supervision as appropriate.

7. All Consultants will be involved in assessing trainees including the use of current workplace assessment tools.

8. All Consultants are committed to provide tuition and clinical supervision as appropriate.

9. Access to educational resources will be available support personal development.

10. Whenever possible, trainees will be released to attend formal teaching.
**Trainee Responsibilities**

The Department expects the trainees to undertake the following activities:

1. Maintain the professional standards laid out in Good Medical Practice at all times
2. Take an active part in the training programme
3. Participate fully in appraisal, assessment and annual review
4. Agree to a training plan with an educational supervisor
5. Inform the College Tutor and Service Organiser if their educational needs are not being met.
6. Give adequate notice of out-of-work place study time
7. Make the best use of research / study time
8. Agree to take part in the training of others as appropriate
9. Attendance at formal teaching provided is expected when you are released from clinical duties to do so.
10. Participate in contractual requirement to complete Doctor's hours monitoring forms and return by due date.
11. Complete surveys as required by the Programme, Deanery or GMC
12. Work within the current working time directive and inform the department if, under exceptional circumstances, you are required to work beyond it.

Signature (College Tutor / Educational Supervisor)    Date:

Signature (Trainee)        Date: