

## Stage Two Training in the Warwickshire School of Anaesthesia

Stage two training is completed over 2 years [adjusted for LTFT working patterns] across several rotational allocations to hospitals in the training programme. The guide below will help you plan which areas of the curriculum to concentrate on during each rotation and will provide advice as to the ARCP requirements during these two years. Details of which training opportunities are available in which trust in the rotation are included [here](#).

You will need to re-register with the RCOA at the start of stage 2 training, and you can do this [here](#).

See the [ARCP checklists](#) on the WSOA website for more information when preparing for ARCP.

For further advice, see the WSOA website, the RCOA website or discuss your training with your educational supervisor, college tutor or training programme director.

### Generic Professional Capabilities [GPCs]

- There are 7 GPCs which require evidence to complete stage 2 training.
- Collect evidence for these GPCs throughout the stage of training.
- Do not complete the HALO for these domains until just before your ARCP at the end of ST5.**
- Examples of suitable evidence for these domains are listed [here](#).
- You should use your educational development time [EDT] to work towards the requirements of these domains.

### Perioperative Medicine and Health Promotion and the General Anaesthesia Domains

- These are the 2 largest domains of the stage of training.
- Do not complete the HALO for these domains until just before your ARCP at the end of stage 2.**
- These domains require subspeciality experience in 4 areas.
- Each should be evidenced with a triple-c form.
- Indicative times for each subspeciality area of training would be 2-3 months.
  - Obstetric Anaesthesia** – can be completed at most hospitals in the school
  - Paediatric Anaesthesia** – completed with a placement at Birmingham Children's Hospital [1-month secondment or 3-month rotational placement] alongside experience at other hospitals in the school.
  - Cardiothoracic Anaesthesia** – completed during a rotational placement at UHCW
  - Neuroanaesthesia** – completed during a rotational placement at UHCW supplemented by a 1-month secondment to QEHB.
- An MTR will be required for each of the above triple-c forms.
- These domains also require experience of anaesthesia for airway, trauma, non-theatre, general surgery, day surgery, ophthalmics and experience of preoperative assessment of patients both in the ward and clinic environment.
- Experience during on-call work will also help provide evidence for these domains.
- An MTR will be required for these HALOs [this can be the generic MTR for your ST5 year].

### Regional Anaesthesia and Pain Domains

- HALOs for these two domains can be completed at any point during this stage of training.
- An MTR will be required for these HALOs – a generic MTR for the year of training could be used if it comments on these domains of training.

### Practical Procedures Grid

- The practical procedures grid should be evidenced to the appropriate supervision levels during this stage of training and will be assessed at the ARCP at the end of ST5.
- The regional components of this grid are best linked to the regional anaesthesia domain and assessed as part of this HALO.
- The other components should be linked to appropriate parts of the curriculum and details of their location should be included as part of the ESSR at the end of ST5 for ease of assessment using [this](#) form.

### Procedural Sedation

- The HALO for this domain can be completed at any time during this stage of training.
- It is likely to include evidence from elective and emergency experience.
- It should be supported by an MTR, which could be a generic MTR for ST4 or ST5 if there is a comment on this area of practice.

#### ICM and Resuscitation and Transfer

- A three-month ICM placement is required during stage 2 training, during which daytime and on-call work should be undertaken in intensive care.
- Stage 2 ICM can be completed at UHCW, Heartlands and Good Hope Hospitals and Worcester **ONLY**.
- Stage 2 ICM can not be completed at Redditch, Warwick or George Eliot Hospitals.
- The HALO for this domain should be completed by the local FICM tutor after this placement and should be supported by an MTR from ICM assessors.
- You no longer need a separate MSF for ICM, but your MSF for the year could be done during your ICM placement if you wish.
- The requirements of the resuscitation and transfer domain are often cross-linked, and this can be completed at the same time.

#### Additional Requirements of this Stage of Training

- Evidence of a personal development plan with appropriate goals set and achieved.
- A minimum of 3 supervisory meetings documented on the LLP per year.
- A logbook maintained on the LLP.
- A minimum of 1 MSF per year of training with 12 or more responses.
- A minimum of one Multiple Trainer Report [MTR] per year. although additional MTRs are recommended to support triple-c assessments.
- Involvement in at least one QI project during stage 2 training – ideally evidenced with an A-QIPAT.
- You will need to complete all components of the Final FRCA examination before the end of ST5.
- A Form R for each ARCP.
- Evidence of reflective practice throughout the LLP portfolio.
- An ESSR should be completed at the end of each placement [except short placements at BCH].
- **An ESSR for an ARCP should cover the start and end dates under review of that ARCP.** The start date should reflect the end date of the previous years' ARCP.

#### Dual Training in Intensive Care Medicine

- For those on a dual training programme in anaesthesia and ICM, the ST5 year should consist of three months training in general ICM, cardiothoracic anaesthesia, neuroanaesthesia and paediatric anaesthesia.
- These requirements should be discussed with your FICM tutor and evidenced using the appropriate HILLOs.
- These requirements are not in addition to the anaesthetic requirements but should be completed in parallel.
- It is important to ensure your stage 2 training years are planned appropriately to facilitate this.