

Stage Two Training

Stage two training is completed over 2 years [adjusted for LFT 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. 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 ST5.**
- These domains require subspecialty experience in 4 areas. Each should be evidenced with a triple-c form [click below for more details]. Ensure that you complete these as a priority when working in hospitals that can provide this experience to prevent having to return on an honorary contract later in the stage of training. Dual trainees in ICM and anaesthesia should also refer to advice later in this document. Indicative times for each subspecialty area of training would be 2-3 months.
 - [Obstetric Anaesthesia](#)
 - [Paediatric Anaesthesia](#)
 - [Cardiothoracic Anaesthesia](#)
 - [Neuroanaesthesia](#)
- An MTR will be required for each of the above triple-c forms.
- Other areas of these domains are indicated [here](#).
- Experience during on-call work will help provide evidence for these domains.
- An MTR will be required for these HALOs and 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.
- The specific requirements of these domains are indicated [here](#).
- 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.
- When completing the regional anaesthesia domain, ensure all regional techniques listed in the practical procedures grid are evidenced to the appropriate supervision level.

Practical Procedures Grid

- The practical procedures grid must 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.

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 an emergency experience.
- The requirements of the domain are listed [here](#).
- 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.
- The HALO for this domain should be completed after this dedicated period of time and should be supported by an MTR from ICM assessors.
- An MSF will be required when completing ICM – this should be **in addition** to the anaesthetic MSF for the year.
- The FICM tutor should complete this HALO.
- This will be the final dedicated ICM block and is equivalent to **higher ICM training** in the 2010 curriculum and so should be undertaken in centres capable of providing the appropriate training and experience.
- The requirements of the resuscitation and transfer domain are often cross-linked, and this can be completed at the same time. Details of the requirements of this domain are listed [here](#).

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 3 Multisource Feedback Assessments [MSFs] are required for stage 2 training:
 - Anaesthetic MSF for ST4 and ST5.
 - Separate ICM MSF completed during that block of training.
- 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 audit/QI project during each year of 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 year of training.
- Evidence of reflective practice throughout the LLP portfolio.
- An ESSR should be completed for each placement [except short placements at BCH which will be evidenced using the triple-c form]. 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 – HST in ST5

- 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.

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