

# SPECIFICATION FOR ADVANCED VOCATIONAL TRAINING IN ANAESTHESIA

## 1.0 PREAMBLE

This specification outlines the requirements for anaesthetic registrar training. It is based on the guidelines of the Australian and New Zealand College of Anaesthetists (ANZCA).

In this specification, the term 'registrar' means registrar in training as defined in Section 3.1 Registrar Eligibility.

Other terms are defined in the CTA Head Agreement and/or Service Agreement.

## 2.0 DESCRIPTION OF SERVICE

The programme is a five year (or part-time equivalent) clinically-based (apprenticeship) registrar training programme leading to a Diploma of Fellowship of Anaesthesia. The training programme provides a general learning experience which encompasses: clinical experience to develop diagnostic and problem solving skills, clinical and technical expertise in managing anaesthesia; a broad-based experience, including knowledge of emergency medicine and trauma management, both adult and paediatric ICU, neonatal intensive care and resuscitation, acute and chronic pain management, general medicine and surgery as an important prerequisite to specialist anaesthetist practice; basic experience in investigative techniques, research design and clinical audit, and basic sciences, e.g. pharmacology, physiology, mathematics and physics.

The programme should include preparation for health leadership and management. It is likely to include effective service delivery and resource management, the management and policy environment in the New Zealand health system (including some understanding of the concept of health economics), models of health service delivery and some exploration of how multidisciplinary teams function.

Learning is facilitated through the creation of a planned and managed learning environment achieved through interactions between the registrar and patients, interactions with other health professionals in a variety of clinical settings (operating theatres, wards, and departments), and includes access to formal teaching sessions, meetings and discussions, direct supervision of the clinical service provided, and support and guidance to ensure that learning occurs and progress towards qualification is made.

## **2.1 LEARNING ENVIRONMENT**

Training occurs in an approved post in a facility accredited by the ANZCA. Registrars may undertake anaesthetist training part-time, with approval from the ANZCA. Registrars shall be released from service to attend theoretical training and receive supervision and training.

The training programme provides for graded responsibilities over the training period. At the beginning, the registrar requires close supervision of all clinical activities. By the end he/she is capable of largely independent practice.

### **2.1.1 Clinical Placements**

#### ***General Requirements***

Registrars' rotations should be selected to ensure that a full range of approved relevant experience and supervision by a range of qualified consultants is provided.

#### ***Specific Requirements***

The training programme in anaesthesia must include at least three months and no more than 15 months of experience in intensive care, as well as appropriate periods of anaesthesia for major sub-specialties and work in other allied medical disciplines approved by the College. Registrars are required to work in a selection of different hospitals. This must include a minimum of at least two sites, and must not contain more than a maximum of four years in any one site.

### **2.1.2 Formal Teaching Programme**

#### ***General Requirements***

A formal teaching programme, delivered by appropriately skilled and experienced staff, should be provided. This should average four hours a week for 30 weeks of the year throughout the training programme. It should include regular tutorial sessions, and attendance at audit and review meetings. It should meet the curriculum requirements of the ANZCA and include specific preparation for examinations.

#### ***Specific Requirements***

The formal teaching programme in Years 1 and 2 provides teaching in the basic principles, skills and practice of anaesthesia as preparation for the Part I examination.

The formal teaching programme in Years 3 and 4 provides teaching in advanced anaesthetic techniques as well as exposure to the subspecialties of obstetrics, neurosurgery, thoracic surgery, paediatric surgery, cardiac surgery and pain management in preparation for the final examination.

### **2.1.3 Access to Resources**

To meet the objectives of the training programme, the registrar requires access to:

- An approved formal teaching programme.
- Quality assurance programmes.
- Adequate library facilities with journals and up-to-date texts appropriate to anaesthesia.
- Clinical support services appropriate to the role of the hospital.
- Clinical meetings, seminars and tutorials, and other professional forums.
- A necessary variety of clinical material for training.
- Adequate personal anaesthesia experience for the registrar, under adequate supervision.

## **2.2 SUPERVISION**

Supervision and assessment of registrars is necessary to ensure quality of training, general progress, suitability to continue training, and suitability to sit the Primary and Final examinations.

### **2.2.1 Clinical Supervision**

*Supervision must be performed by an anaesthetist who possesses the Diploma of FANZCA or a qualification acceptable to the College.*

The following requirements are a guideline. However, any variance from these requirements must be approved by the ANZCA.

There are four categories of supervision:

1. Supervisor rostered for one registrar and available solely to that registrar.
2. Supervisor rostered to supervise two registrars who are in operating theatres in close proximity. The supervisor must be fully conversant with the nature of the patients on both lists, and able to provide one-to-one supervision of each as appropriate.
3. The supervisor is available either in the operating suite or the hospital, but is not exclusively available for a specific registrar.
4. The supervisor is not in the hospital but is on call within reasonable travelling time, and is exclusively rostered for the period in question. This category of supervision applies mainly to out-of-hours cases. Consultation must be available at all times.

### ***General Requirements***

Sufficient supervisors (no less than one FTE for each registrar) will be provided who have FANZCA, or an approved equivalent, and will supervise not only clinical situations but also record-keeping, audit, teaching and preparation of scientific material, and the skills, knowledge and attitudes desirable in an anaesthetist.

- Supervision at Category 1 or 2 level should average at least 25% of all work done by registrars.
- Category 1 level supervision should always be provided while registrars are familiarising themselves with any working area with which they are unfamiliar.
- Supervision at category 4 level should not average more than 30% of all work done by registrars.
- At all stages of training, a supervisor should be available to attend an anaesthetic whenever a registrar requests assistance.
- During the time registrars are on duty or on call, there must be a clear line of responsibility from patient to the registrar to a designated consultant anaesthetist.

## ***Specific requirements***

### **Year One**

Supervision should be at category 1 level for all cases during the initial period, which varies in length according to the registrar's development of skills and judgement.

Supervision at categories 1 & 2 level should be provided for most in-hours cases.

After the initial period, the supervisor should be notified for all out-of-hours cases. At least 25% of them should be supervised at categories 1 & 2 level, and the supervisor should attend for all high risk patients.

### **Year Two**

Supervision at categories 1 & 2 level should be provided for about half the in-hours caseload, and at least 20% of the out-of-hours caseload.

The supervisor should be advised of all young children, all seriously ill patients, and any patients posing special problems for the anaesthetist.

### **Year Three**

Category 1 level supervision should normally be provided for specialised areas such as cardio-thoracic, obstetric, and major paediatric anaesthesia.

For out-of-hours work, the supervisor should be advised of all young children, all seriously ill patients, or those providing special problems for the anaesthetist.

### **Year Four**

Supervision at category 3 level may be appropriate for all work previously encountered, but it may still be necessary for supervision to be at category 1 level for new work experiences.

For out of hours work, consultation can be at the discretion of the registrar but consultation (and where necessary supervision) remains essential for unfamiliar clinical situations.

### **Provisional Fellow**

Consultation and appropriate supervision must be available at all times.

## 2.2.2 Educational Supervision

Educational supervision may be carried out as part of the clinical supervision.

The Supervisor of Training in Anaesthesia at each training centre should:

- Advise anaesthetic registrars on all aspects of training.
- Ensure that structured programmes and clinical attachments organised as preparation for the examinations will be linked to the examination timetable.
- Approve the outline of the formal teaching programmes.
- Provide 'coaching' to registrars, as necessary, in their preparation for examinations.
- Advise trainees on the application of culturally appropriate care to the practice of anaesthetics.

## 2.3 PROGRAMME CO-ORDINATION

*An ANZCA approved Supervisor of Training in Anaesthesia at each training centre will:*

- Be familiar with the College's Regulations on Training, Examination and Registration of Registrars.
- Regularly evaluate registrars' training, both clinical and academic experiences, including administering and collating in-training assessments at six monthly intervals, and keep records of their progress.
- Advise potential and current registrars on their training and registration requirements.
- Monitor supervision, experience, and allocation of duties for registrars, and facilitate such changes as may be necessary.
- Liaise with the Director of the Department in respect to registrars' duties, supervision, rest and study time, and release for approved courses.
- Establish and maintain liaison with the Regional Education Officer, including providing all information required by the College on registrars' progress.

- Establish and maintain liaison with other Supervisors of Training, including attending at least one regional meeting for supervisors per year.

## **2.4 EXPECTED OUTCOMES**

All educational objectives are to be met as demonstrated by passes in both Primary and Final examinations.

Entry to Year 3 (ie, Post Part 1 status) is dependent on success in the Part 1 examination, written and clinical components. After completion of at least four years' training, and passing of both the Primary and Final examinations, the registrar can apply for Provisional Fellowship. This year must be undertaken in an approved position with appropriate supervision available. Satisfactory completion of this year leads to full Fellowship of the ANZCA.

## **3.0 ELIGIBILITY**

### **3.1 REGISTRAR ELIGIBILITY**

Registrars must be accepted by the ANZCA into the training programme and

- Be a graduate in Medicine and Surgery of a Medical School recognised by the Medical Council of New Zealand; and
- Have general registration as a medical practitioner from the Medical Council of New Zealand.

Medical graduates who do not meet the above criteria may be considered on a case by case basis.

Registrars must:

Have completed a minimum of 2 years post-graduate medical experience, not more than six months in anaesthesia, and/or intensive care, and/or general practice.

### **3.2 PROVIDER ELIGIBILITY**

Training occurs in an approved post in a programme in a facility accredited by the ANZCA. The facility should be inspected by the ANZCA at not less than five yearly intervals.

#### 4.0 LOCATION AND SETTING

Under Part 9 of the CTA Head Agreement, any subcontracting of the formal teaching programme and/or some of the approved posts can only occur with the CTA's prior written consent. When approved posts are subcontracted to other providers to ensure appropriate rotation schemes, the posts must be approved by the ANZCA and there must be at least one FTE specialist anaesthetist for each registrar to provide supervision.

#### 5.0 ASSOCIATED LINKAGES

The provider will have established linkages with:

- The Australian & New Zealand College of Anaesthetists, and the Regional Education Officer.
- Other anaesthetic training programmes.
- The provider of the relevant formal teaching programme.
- Patient Advocates for Code of Health and Disability Services Consumer Rights and Privacy Issues.

#### 6.0 PURCHASE UNIT

A registrar in an ANZCA approved training post for anaesthetist training.

The Purchase Units are as follows:

- Pre Part 1.
- Post Part 1.
- Provisional Fellowship Year.

(Please refer to Section 2.4 – Expected Outcomes, for classification of the above).

Part-time registrars who are funded under this contract will be funded on a pro-rata training unit basis.

#### 7.0 QUALITY STANDARDS: PROGRAMME SPECIFIC

*This section should be read in conjunction with Schedule 1 Part 3 of the CTA Head Agreement which specifies **generic** quality standards for all programmes provided under the contract.*

Each training provider will demonstrate their commitment to training by:

- Ensuring the provision of timely and effective feedback to registrars on their progress towards the attainment of the attitudes, skills and knowledge objectives as outlined in the Objectives of Training Report. Six monthly in-training assessments of the registrar's performance should be undertaken by all the senior staff of the Department with whom the registrar has worked during the assessment period.

## **8.0 REPORTING REQUIREMENTS: PROGRAMME SPECIFIC**

*This section should be read in conjunction with Schedule 1 Part 1 of the CTA Head Agreement which specifies **generic** reporting standards for all programmes provided under the contract.*

### **8.1 PROGRESS REPORTING**

Section 2.4 of the specification details the expected outcomes of the training programme purchased.

### **8.2 QUALITY REPORTING**

Reports as described in Schedule 1 Part 1 of the CTA Head Agreement require summary of the programme. Schedule 1 Part 3 of the CTA Head Agreement requires that you have a quality plan in place for the ongoing monitoring of the training provided. The summary should refer specifically to the outcomes of this internal quality management and make specific reference to the programme specific quality standards in 7 above.