

2011

Nottingham & East Midlands School of Anaesthesia

Intermediate Training Programme

East Midlands Healthcare Workforce Deanery



Dr Grainne O'Dwyer

Specialty Training Programme Director

10/08/2011

NEMSA INTERMEDIATE TRAINING PROGRAMME

Welcome to the Nottingham and East Midlands School of Anaesthesia (NEMSA) INTERMEDIATE LEVEL training programme in anaesthesia for speciality trainees.

The Intermediate Training Programme in Anaesthesia for the northern half of the East Midlands Deanery is managed by the Nottingham (North) East Midlands School of Anaesthesia (NEMSA) – further information about the school is available on the website www.nemsa.net . The training programme is based in a number of hospitals in the region including:

- ◆ Chesterfield Royal Hospital
- ◆ Derby Hospitals
- ◆ King's Mill Hospital, Sutton-in-Ashfield (north Nottinghamshire)
- ◆ Lincoln County Hospital
- ◆ Nottingham University Hospitals Trusts:
 - Queen's Medical Centre Campus
 - Nottingham City Hospital Campus

Details of rotations and individual trainee placements will be provided prior to the applicant starting the programme. All trainees will work in both district general hospital and teaching hospital environments. At the end of each year, following a satisfactory Annual Review of Competence Progression (ARCP), the trainee will progress to the next year of training.

WHO'S WHO IN NEMSA:

Medical Specialties Dean for East Midlands North

Dr David Williams

Responsible for overall management of postgraduate education. Carries out Central Government instructions to train specialists. Formulates contracts with trusts to provide training posts and monitors performance through educational contracts. Ensures trainee well-being and provides resources and staff to assist poorly performing trainees.

Associate Post-graduate Dean for Anaesthetics (North)

Dr Des Green

Deanery Specialty Co-ordinator

Mrs June Prior

June Prior is an essential point of contact at the East Midlands Deanery for trainees. She can be contacted by email (june.prior@nottingham.ac.uk) or telephone 01158468530.

Head of School of Anaesthesia

Dr Andy Norris

Consultant Anaesthetics, Queen's Medical Centre

Acts as the representative of the postgraduate dean in the School of Anaesthesia

Specialty Training Programme Director

Dr Grainne O'Dwyer

Consultant Anaesthetist Lincoln County Hospital

Responsible for managing Specialty training on behalf of the deanery. Coordinates placements and leads on recruitment and assessment. (Catherine.O'Dwyer@ulh.nhs.uk or telephone 01522 573690 or 573692)

Core Training Programme Director

Dr Rob Mccahon

Consultant Anaesthetist Queen's Medical Centre

Responsible for managing core training on behalf of the deanery. Coordinates placements and leads on recruitment and assessment. (Rob.Mccahon@nottingham.ac.uk)

RCA Regional Advisor

Dr Andy Norris

Consultant Anaesthetist Queen's Medical Centre

The RA is appointed by the college and monitors training on behalf of the college throughout the region (Mid Trent). He implements college policies through the college tutors, has a role in assuring the quality of training and helps to develop educational strategy within the school.

RA Regional Advisor for Intensive Care Medicine

Dr Mark Ehlers

Consultant Intensivist Queen's Medical Centre

The RA for ICM is appointed by the Intercollegiate Board and monitors training on behalf of the college throughout the region (Mid Trent). He implements Board policies through the Board tutors, has a role in assuring the quality of training in ICM.

RCA Regional Advisor for Pain Management

Dr Adrian Searle

Consultant Anaesthetist Derby Hospitals

The RA is appointed by the college. He carries out the similar roles for Pain Management as the RA for anaesthesia.

College Tutors

Queen's Medical Centre

Dr Jonathan Mole and Dr Chris Gornall

Nottingham City Hospital

Dr Munib Malik and Dr Henry Skinner

Derby Hospitals

Dr Zulfi Sadiq and Dr Roberto Caranza

Kings Mill Hospital

Dr Sri Narra

Lincoln County Hospital

Dr Matthew Dolling

Chesterfield Royal Hospital

..Dr Tim Meekings

The College Tutor is the local point of contact with the RCA for trainees. He/she represents the RCA at each hospital and organises training. He/she also oversees examination preparation, facilitates professional development and gives career advice.

Flexible Training Advisor

Dr Amelia Banks

Consultant Anaesthetist Nottingham City Hospital

Educational Supervisors

A named Educational Supervisor will be allocated to each trainee at their educational induction. You will arrange to meet your educational supervisor a minimum of 3 times in every twelve month period. These will allow your educational progress to be reviewed and appraised, using constructive feedback, support and guidance. They are responsible for writing the formal educational supervisors structured report that is essential for the Annual Review of Competence Progression. They also complete an annual workplace based NHS appraisal.

Unit of Training Assessor/Clinical Supervisor

Supervises the individual unit of training and completes the trainee assessment form for time spent in that module/unit. The unit supervisor acts as a point of contact between consultants in that field and trainees.

Clinical Supervisor

Any Consultant that is supervising your training in the workplace, e.g. training lists in theatre, clinics, critical care. They will provide input to the assessment process through communication with the unit assessor/supervisor. They are responsible for patient safety during a training session.

Membership of NEMSA School Board

Chair	Dr Andy Norris
Training Programme Director	Dr Grainne O'Dwyer
Core Training Programme Director	Dr Rob McCahon
Regional Advisor RCA	Dr Andy Norris
Regional Advisor Pain	Dr Adrian Searle
Regional Advisor ICM	Dr Mark Ehlers
Associate Postgraduate Dean	Dr Des Green
Deanery School Co-ordinator	June Prior
University Department Representative	Dr Jon Hardman
College Tutors all NEMSA Hospitals	as above
Flexible Training Coordinator	Dr Amelia Banks
Teaching Programme Co-ordinator	Dr Adam Carney
Education adviser	Prof Bryn Baxendale
Trainee Representatives	TBC (core)
	Dr Tom Heinink (intermediate)
	Dr Steve Gill (higher)

NEMSA Board meetings take place quarterly.

Useful sources of training information

- The East Midlands Healthcare Workforce Deanery (EMHWD); see www.eastmidlandsdeanery.nhs.uk
- The NEMSA website contains information and documentation on all aspects of Basic Level Training; see www.nemsa.net On the website, information can be accessed regarding the Deanery arrangements for flexible training, out of programme training, inter-deanery transfers and training support.
- You must provide an email address which you are expected to check on a regular basis as this is the main means of communication within the School of Anaesthesia.
- The Virtual Learning Environment www.vle.eastmidlandsdeanery.nhs.uk/

ORGANISATION OF THE INTERMEDIATE TRAINING PROGRAMME

College Requirements

1. All trainees must be **registered** with the Royal College of Anaesthetists
 - a. The registration form and explanatory notes are available on the college website.
2. Every trainee **must** maintain a **logbook**.
 - a. This should be stored electronically preferably on the RCoA electronic logbook. Further information is available from the College website.
 - b. You must be able to **provide accessible summaries when requested. Frequent backing up of data is strongly recommended.**
 - c. The trainee log will be analysed at the time of formative and summative assessments. You will be required to produce a **cumulative and period of assessment logbook.**

Deanery Requirements

All trainees must be registered with the Deanery for Postgraduate Training. All new ST3 trainees must complete a deanery **Form R** to register with the deanery as a specialty trainee. The Deanery will issue a unique National Training Number (NTN) and subsequently the trainee will be given a predicted CCT date by the RCoA which is five years after entry to ST year 3. It is important to ensure that the information on the Deanery database is kept up to date you must therefore keep them informed of any changes to your contact details, immigration status and events that might impact on your training progression.

This period of training will normally last twenty-four months; it is an intense period of training with trainees having to gain intermediate level competencies in all the units of training undertaken as well as in important new areas of clinical practice. The trainee will be allocated to anaesthetic departments taking into account the RCoA requirements for Units of Training – no hospital can provide all units. Trainees will generally be placed at QMC for a minimum six months and NCH for a minimum six months and will spend six to twelve months in a DGH.

It is essential that each individual trainee takes responsibility for ensuring that all the essential units of training have been completed by the end of ST4.

College Tutors should be contacted in advance of a hospital placement to arrange which training units a trainee plans to undertake. Each unit has a named supervisor though hospitals differ in how the programme is organised. The NEMSA website maintains an up to date list of unit/module supervisors.

CLINICAL TRAINING

Annex C (Intermediate Level Training) of the RCoA Curriculum for a CCT in Anaesthesia details the curriculum for the entire Intermediate level training period. This is a very comprehensive document. **It is strongly recommended that you refer to this frequently to guide your learning and progress.**

At each stage of training or when working within a particular sub-speciality /unit of anaesthesia it is useful to refer to the guide and consider any particular learning objectives for that period. The unit supervisors are able to help with this if requested.

Essential units

There are seven essential units of training at Intermediate Level, which all trainees are normally expected to complete satisfactorily before progressing to Higher/advanced training.

They are as follows:

Anaesthesia for neurosurgery, neuroradiology and neurocritical care

Cardiac/Thoracic

General duties

- Airway management
- Critical incidents
- Day surgery
- General, urological and gynaecological surgery
- ENT, maxillo-facial and dental surgery
- Management of respiratory and cardiac arrest
- Non-theatre
- Orthopaedic surgery
- Regional
- Sedation
- Transfer medicine
- Trauma and stabilisation

Intensive care medicine * - three month block placement

Obstetrics

Paediatric

Pain medicine

With the exception of the 'general duties' unit of training, it is recommended that trainees spend between four and twelve weeks in each unit of training; this should equates to a minimum of twenty half day theatre sessions to ensure trainees are able to complete all the essential learning outcomes. Many years of experience suggest that this amount of time may be insufficient for a number of trainees; further, the greater the clinical exposure the greater the learning experience.

Optional units

There are three optional units of training at Intermediate Level:

Ophthalmic

Plastics/Burns

Vascular surgery

NON CLINICAL TRAINING

In addition to clinical training, it is essential that each trainee also focuses on their general professional development.

Training in professional knowledge, skills, attitudes and behaviour includes:

- communication skills, attitudes and behaviour
- the responsibilities of professional life
- teaching and medical education
- health care management
- information technology
- medical ethics and law

The specific professionalism and common competencies expected throughout training are also embedded in the clinical units of training at all levels; they will be expected to be included within the assessments of clinical training.

Twelve domains have been identified covering professionalism and common competencies. These are as follows:

Domain 1: Professional attitudes

- a. Commitment
- b. Compassion
- c. Honesty and personal integrity
- d. Respect for others
- e. Community
- f. Competence

Domain 2: Clinical Practice

Domain 3: Team working

Domain 4: Leadership

Domain 5: Innovation

Domain 6: Management

Domain 7: Education

Domain 8: Safety in Clinical Practice

Domain 9: Medical ethics and confidentiality

Domain 10: Relationships with patients

Domain 11: Legal framework for practice

Domain 12: Information Technology

THE FINAL FRCA EXAMINATION

The Final FRCA examination is a basic standard of knowledge that is expected of all trainees, irrespective of their ultimate specialist interests in anaesthesia. To be eligible to sit the FRCA Final examination trainees must have been awarded the *Basic Level Training Certificate*.

Advice about the FRCA exam can be sought from College Tutors.

A programme of tutorials preparing trainees for the examination is organised by Dr Rik Kapila, consultant anaesthetist, Nottingham City Hospital.

CLINICAL SUPERVISION

To ensure patient safety, all trainees must, at all times, be appropriately supervised.

A minimum of three supervised sessions per week (averaged over 3 – 6 months) is required. To protect the interests of patients a trainee will be responsible to and subject to supervision by a designated consultant at all times. This includes those occasions when a trainee is delegated the authority to make decisions without immediate reference to a more senior clinician.

It is expected that trainees receive clinical supervision appropriate to their experience.

All trainees are encouraged to seek advice and/or assistance as early as possible when they are concerned about patient management.

Trainees should never be expected to undertake a task for which they have insufficient experience or expertise.

Trainees should always have direct access to a senior colleague who can advise them in any clinical situation.

EDUCATIONAL SUPERVISION

The GMC guide to Specialist training, “the Gold Guide”, requires that each individual trainee has a named **Educational Supervisor**. NEMSA will allocate an Educational supervisor who will be responsible for the trainee for the duration of intermediate training.

The supervisor and trainee will need to arrange a **minimum of 3 meetings a year**, more if necessary. For each meeting the supervisor will maintain a record of the meeting briefly outlining key areas discussed and any actions required. A copy of record should be given to the trainee for his/her portfolio.

ASSESSMENT

Professional practice means more than the performance of clinical skills. It very importantly carries a commitment to **standards** and the **attitudes** which will maintain those standards throughout working life. The necessary **knowledge, skills** and **attitudes** have now been defined by the RCA for all aspects of training in anaesthesia. All three of these attributes need to be assessed.

The following information is an important summary of the documented assessments that each trainee will require to have a satisfactory outcome at ARCP and progress to the next year of training. These assessments are mandatory.

- The trainee's logbook must be kept up to date and reviewed.
- The trainee keeps all original assessment documentation with their training portfolio
- The trainee forwards a copy of all unit/modular assessments and certificates to Dr Grainne O'Dwyer
- If the trainee does not meet the required standard in any unit assessment the reasons must be given and documented and Dr Grainne O'Dwyer informed by the trainee.
- If a trainee does not meet the necessary standard on an individual assessment, they must be re-assessed at a later date.
- The sum of the assessments must allow the Intermediate Level Training Certificate to be issued with confidence at the end of intermediate training.

The **ARCP, Annual Review of Competence Progression** is a formal summative assessment which occurs towards the end of a year of training. The constitution of the ARCP panel conforms to standards determined by the Gold Guide.

It is recommended to prepare for the ARCP well in advance. Failure to provide documentation by the date it is required may result in an unsatisfactory outcome. If a trainee is anticipated to have an unsatisfactory outcome, e.g. for examination failure, they will be invited to attend in person. The Educational Supervisor Report may be downloaded at http://www.nemsa.net/index_files

Evidence required for ARCP at intermediate level;

1. Educational Supervisors Structured Report – ESR for the year of assessment. This is based on a review of the various workplace-based assessments, training units completed, and non-clinical practice.
2. Logbook cumulative **and** for the year being assessed
3. Personal Learning/Development Plan
4. Teaching attendance record
5. RCoA or FARCSI certificates/letters confirming examination success
6. End of ST4 – a copy of all essential and optional unit/modular assessment forms.

MENTORING

Mentoring is a formal process of supporting a colleague over a period of time, one way of describing a mentor would be a “critical friend”. It is **confidential** and **completely independent** of all systems of appraisal and assessment.

The role of the mentor includes listening non-judgmentally, giving feedback, challenging the mentee to move forward and become increasingly self-reliant. It may explore;

- Stress related to training programme expectations
- Anxiety associated with feelings of inadequacy in certain clinical situations
- Dealing with death and disease
- Examination stress
- Developing professional attitudes and behaviour
- Awareness of personal strengths and limitations
- Problems of a personal nature

We do not allocate mentors to trainees in NEMSA. Ideally trainees should choose their own mentor and almost all consultants are happy to fulfil this role. Often the ideal person to turn to for educational advice is the educational supervisor or college tutor. Trainees are encouraged to approach consultants to act as a mentor or request the College Tutor to do so on their behalf.

The anaesthetic departments and school of anaesthesia regard mentoring positively. Seeking help is regarded as a learning opportunity rather than a sign of weakness or failure.

CLINICAL AND OTHER DUTIES THROUGHOUT THE ROTATIONS

There will be minor variations in different posts in different hospitals but this section is aimed at covering the majority of duties the trainee will be expected to undertake during their time in the training programme.

The trainee will be required to perform such duties as are necessary to the provision of anaesthetic services to the hospitals, as set out in the weekly published anaesthetic rota and according to the individual's level of competence.

All trainee anaesthetic staff are expected to visit their patients before operation and to be involved as appropriate in post-operative management, including pain relief. Trainees will have a regular commitment to routine surgical operating lists under Consultant supervision, in accordance with the recommendations of the Royal College of Anaesthetists, for practical and theoretical tuition. Trainees will undertake suitable independent surgical lists when considered appropriate and according to their level of competence. Trainees are expected to meet their clinical commitments as set out on the weekly published rota.

Trainees are also required to take part in rostered emergency work. They will, according to their level of competence, provide out of hours cover for the operating theatres. Trainees are required to provide anaesthetic assistance within the hospitals in general, including in the Emergency Department, when particular anaesthetic skills are required.

Trainees are also required, according to their level of competence, to participate in the provision of an obstetric analgesia and anaesthesia service, including cover out of hours.

Trainees may have a planned attachment to the Intensive Care Unit where, under the supervision of the Consultant Intensivists, they will assist in the provision of intensive care services, including out of hours.

Trainees are expected to maintain effective working relationships with anaesthetic and surgical colleagues, nursing staff and operating department assistants.

Trainees are required to maintain good clinical records.

Teaching responsibilities

In the core training years there is no formal teaching commitment other than presentation of material in seminar groups. Subsequently intermediate trainees are expected to become involved in more formal teaching activities and may be asked to assist in the organisation of the tutorial programmes, journal club and morbidity meetings. Intermediate trainees are expected to actively engage in the delivery of teaching.

Administration

Typically, trainees take on administrative roles as Speciality Trainees. As such, this is a non-clinical domain which requires development during specialty training. All involvement with rotas, writing guidelines, etc should be recorded.

Study and Training

The East Midlands Healthcare Workforce Deanery is committed to developing postgraduate training programmes as laid down by the GMC, Colleges and Faculties and by the Postgraduate Dean's Network.

The School of Anaesthesia and the local College Tutors work with Unit Director of Postgraduate Education in supervising these programmes.

The local College Tutors are the key link for all trainees in planning and approving their study activities. The different NEMSA hospital departments have a range of arrangements for delivering training outside the clinical environment to trainees at different stages of their training. Trainees at all levels in the School have protected teaching time, although some flexibility is expected in order to maintain essential clinical services.

The School of Anaesthesia has ongoing work developing study programmes appropriate to the learning needs of trainees at different stages of their training. In addition to exam directed study programmes, there are also programmes in place for novice/basic/intermediate/senior level trainees in anaesthesia and senior post-fellowship trainees. Some of these programmes will be delivered in the Trent Simulation and Clinical Skills Centre (see appendix 1 for further information on these facilities). Trainees will be expected to take part in their formal education programmes.

Individual study leave will form part of a trainee's education programmes and will be arranged in conjunction with the appropriate tutor.

Trainees will be required to attend professional review sessions with their educational supervisors and to attend any other sessions recommended to further their

professional development including induction sessions, appraisal interviews and counselling.

All trainees are expected to take an active role in their departments by contributing to journal clubs, morbidity and mortality meetings and the departmental audit programme.

There are library facilities in all the hospitals. All the anaesthetic departments also have departmental libraries and several departments have archived teaching material and IT facilities which provide further educational resources.

Study leave is granted in accordance with Deanery policy and are subject to the maintenance of the service. See below for Study leave allowance for Intermediate Level trainees:

The total study allowance for trainees is 30 days per annum. The following makes up the type of activities that are included within this time.

1. External or personal study leave approved by your local RCoA College Tutor.
2. NEMSA educational days.
3. Local departmental teaching.

Type of Study leave	Days per annum
External or Personal (approved by College Tutor)	10
NEMSA educational days	10
Departmental teaching	10 (20 half days)

Research

Trainees are encouraged firstly to concentrate on obtaining the appropriate clinical competencies and postgraduate qualifications. Where these have been obtained, trainees are encouraged to take advantage of opportunities to participate in research. This may be participation in current research projects or, after liaison with the University Department of Anaesthesia; facilities can be arranged for an individual to pursue his or her own lines of enquiry with appropriate advice.

There are also opportunities within the training programme for senior trainees to undertake an academic training module or a Research Fellow post. During this time the Trainee will receive training in research methodology and, under the supervision of the Academic Department, gain experience of setting up and running scientific studies. Currently the RCA approves up to one year of full time research as training time towards CCT, if this is prospectively planned and approved.

Main Conditions of Service

The posts are whole-time and the appointments are subject to:-

- a) The Terms and Conditions of Service for Hospital Medical and Dental Staff (England and Wales)
- b) Satisfactory registration with the General Medical Council (London)
- c) Medical Fitness – You may be required to undergo a medical examination and chest x-ray. Potential applicants should be aware of the Department of Health and GMC/GDC requirements with regards to HIV/AIDS and Hepatitis viruses. Candidates must be immune to Hepatitis B. You will be required to provide, in advance of appointment, evidence of immunity or have a local blood test (as deemed necessary by the Occupational Health Department)

Salary Scale

The current nationally agreed pay scale for this grade is payable.

Unforeseen Circumstances

In accordance with the Terms and Conditions of Service of Hospital Medical and Dental Staff (England and Wales) paragraph 110, Junior Doctors shall be expected in the run of their duties and within their contract and job description, to cover for the occasional and brief absence of colleagues as far as is practicable.

European Working Time Directive (EWTD)

All posts on the rotation comply with European Working Time Directive regulations.

Junior Doctors' Monitoring

From 1 December 2000 there is a contractual obligation to monitor junior doctors' New Deal compliance. In accordance with Health Service Circular 2000/031 junior doctors have a contractual obligation to monitor hours on request; this will include participation in local monitoring exercises.

Removal expenses

The removal expenses applicable to this post will be the policies issued by the Administrative Trust. You should not commit yourself to any expenditure in connection with relocation before first obtaining advice and approval from the Personnel Department at your Administrative Trust, otherwise you may incur costs, which you will be unable to claim.

Use of Information Technology

Under the Computer Misuse Act 1990, any individual who knowingly attempts to gain unauthorised access to any programme or data held on a computer can be prosecuted. An individual who modifies any programme or data in a computer which they are unauthorised so to do, is also liable under the Act. If found guilty of these offences a person may be given a custodial sentence of up to six months or a fine or both. The person would also be subject to disciplinary action which may result in dismissal.

Similarly, in accordance with copyright law, any person involved in the illegal reproduction of software or who makes, acquires or uses unauthorised copies of computer software, will be subject to disciplinary action, which may lead to dismissal.

Notification of Termination of Employment

A minimum of three months notice is required.

WHAT TO DO IF YOU ARE HAVING PROBLEMS

Not infrequently trainees encounter difficulties some of which are described above. We would encourage you in the first instance to discuss any difficulties with either your educational supervisor, mentor or college tutor. If the problem is likely to affect your professional work then we would **expect** you to raise it with someone.

Occasionally individuals may wish to self refer to the Training Support Unit at East Midlands Deanery. This service is completely confidential and is available to all trainees free of charge.

What is the TSU?

The TSU is a support service to help trainees tackle any problems they may face during their training. It is not uncommon for trainees to experience personal or professional difficulties which impact directly or indirectly upon their work or training.

Examples of these difficulties include:

- Personal illness or stress
- Family illness and/or bereavement
- Performance concerns, either informal or formal, e.g. unsatisfactory RITA or ARCP outcomes
- Exam stress/academic study problems
- Communication issues
- Time management and/or organisation
- Uncertainty around future career path

The TSU exists to provide a support service for East Midlands trainees, as well as a co-ordinated approach to deal with performance issues sensitively and effectively.

TSU offers a

consistent approach for trainees within the East Midlands, in clarifying issues and concerns regarding a trainee's performance. This facilitates early intervention for any significant problems identified, and helps avoid inappropriate GMC referrals.

Where is the TSU?

The TSU is based at the Nottingham office of the East Midlands Healthcare Workforce Deanery (EMHWD) and serves trainees throughout the whole of the East Midlands.

When can you contact the TSU?

We are available Monday to Friday, during the core office hours of 9am to 5pm. Telephone messages can be left outside these hours and we aim to respond to enquiries as soon as possible. If you would like to speak to somebody in person in the TSU, please call the Nottingham office on **0115 8467641** in the first instance.

NOTTINGHAM UNIVERSITY HOSPITALS

The two major hospitals in Nottingham merged into a single Trust in April 2006 to create one of the largest acute hospitals in Europe. The Trust has an annual budget of more than £500 million and over 11,500 staff. The Nottingham University Hospitals NHS Trust comprises the Queen's Medical Centre Campus and the Nottingham City Hospital Campus, serving an immediate population of approximately 620,000.

NUH enjoys close links with the region's universities and attracts and develops the highest calibre of staff. The work being carried out by NUH researchers has led to a reputation for excellence and the Trust continues to attract and encourage investment and remains at the forefront of research with about 700 active research projects and combined Research and Development funding of around £9m from the Department of Health.

The University Department of Anaesthesia, headed by Professor Ravi Mahajan, maintains close links with the Clinical Directorates and encourages active programmes of teaching and research. The University Department has a large number of research projects in progress and is keen to support new ideas of clinical or laboratory based research among all members of staff in training and Consultant grades.

A wide range of laboratory equipment is available and there are facilities for statistical advice and analysis within the University Department and through direct links to the University mainframe computer. Advice and practical help are always available in connection with production of research protocols and preparation of manuscripts for publication in scientific journals.

The Trent Simulation and Clinical Skills Centre **opened in April 2004 – a state of the art simulation centre and clinical skills facility. It is a two-storey extension to the Postgraduate Education Centre and the regional centre within Trent for advanced human patient simulation training offering a range of specialty specific and inter-professional courses. The high fidelity simulators (adult and paediatric METI simulators) use sophisticated computers to create a life-like medical environment allowing realistic scenarios to be reproduced and enacted without any risk to the patient.**

- The patient simulator can be used to provide an extensive range of educational modules including events /scenarios involving the cardiovascular, metabolic, pulmonary, neurological and renal systems as well as trauma and airway events. In addition to normal physiology, a variety of pathological states can be superimposed to provide realistic, potentially life threatening scenarios and thereby challenge participants using complex clinical situations.
- The control room operator guides the simulation in real time thereby modelling patient responses to unfolding events. The simulation is recorded on video that afterwards enables a through analysis and debriefing to take place.

Courses have an emphasis on key issues of crisis resource management, team training, leadership and communication skills. The current Skill and Simulator Centre Director is a consultant anaesthetist (Dr Baxendale), supported by administrative and technical support and a clinical teaching/research fellow.

Queen's Medical Centre Campus, Nottingham University Hospitals NHS Trust

The campus is a major site with over 1,300 beds. The hospital has extensive in-patient and out-patient facilities and the most modern equipment and accommodation. Commissioning started in 1978 and it was completed in 1985. It is the major Emergency Department for Nottingham and the surrounding area with over 140,000 new patients seen each year.

A full range of medical services is provided at the hospital, which is a Regional or sub-Regional specialist centre for several surgical disciplines - these include Spinal surgery, Neurosurgery, some major reconstructive Orthopaedic trauma surgery, Hepato-biliary surgery and Neonatal surgery.

Queen's Medical Centre has one of the largest surgical caseloads in the country. A wide range of surgery is performed on this site with over 30 operating theatres in use. The Anaesthetic Department personnel includes 52 Consultant Anaesthetists including two Professors and two Associate Professors. There is a 14 bed Adult Intensive Care Unit caring for surgical, neurosurgical, trauma and medical patients and separate general surgical HDUs (8 bed) and medical HDUs. There is a Paediatric Intensive Care Unit with 8 beds. The busy spinal unit has an international reputation. A new Eye/ENT wing opened in December 2000, with a 7 theatre operating suite. The obstetric unit includes a professorial Feto-Maternal Medicine Department and has approx 4000 deliveries per annum including a number of high-risk pregnancies.

The hospital is adjacent to the University of Nottingham campus and has all the University facilities. The Queen's Medical Centre houses the Medical Science Department of the Medical School and the Greenfield Medical Library, to which all members of the hospital medical staff have free access and borrowing rights.

Nottingham City Hospital Campus, Nottingham University Hospitals NHS Trust

Situated just north of the city centre, the Nottingham City campus site has 1,286 beds. When current developments are completed, it will have over 1,400 beds. All these are located on one 85-acre campus with out-patient facilities and all support services.

There is a large capital development programme in progress, which will significantly improve the range of services provided. This includes the new Radiology Department which came into service during 1991, a new Renal and Oncology Department opened in October 1993, and a new Maternity and Neonatal Unit which includes a Patient Hotel. A purpose built Day Case Surgery building opened in 1994. A new Breast Unit opened in 2003 and the new Urology and Cardiac Units have recently opened.

A full range of medical services is provided at the hospital, which is a Regional or sub-Regional specialist centre for several surgical disciplines - these include

Thoracic Surgery, Renal Dialysis and Transplant Surgery, Plastic Surgery and Burns, and Neonatal Medicine and Surgery.

There are very close links with the University Medical School. The hospital plays a full and active part in both undergraduate and postgraduate teaching.

The staffing complement of the department includes 38 Consultant Anaesthetists. There is a large surgical caseload at the hospital which includes cardiac surgery, renal transplant surgery, plastic surgery, urology and a range of cancer surgery. There is a 7 bedded Adult Intensive Care Unit with an additional 5 Cardiac ICU beds and a 10 bedded High Dependency Unit was opened in July 2002.

The busy Maternity Unit has a caseload of over 5000 deliveries per year.

The hospital has been designated a HISS (Hospital Information and Support Service) pilot site. The comprehensive resource management system involves terminals in every ward, bay and office and allows computerised ordering of Pathology, Radiology and other services.

The Postgraduate Education Centre was opened in 1972 and has recently been extended. It provides facilities for seminars, tutorials and research. There is a large well-equipped lecture theatre which seats approximately 150. A Multi Disciplinary Clinical Skills Laboratory opened in 2004. The library is located in the Centre and contains an extensive selection of journals and books. It has access to the medical section of the University Library, National Lending and other libraries in the country, thus providing an extensive range of literature. There is access to CD ROM offering a Medline service.

THE WORK OF THE NUH ANAESTHETIC DIRECTORATE

The directorate of anaesthesia provides services for routine and emergency surgery in all the Nottingham hospitals, cover for Intensive Care Units and Pain Management Programmes, including an Acute Pain Service on both sites. It also provides anaesthetic cover for the Emergency Department on the QMC campus as required.

Clinical Training Opportunities

Across Nottingham University Hospitals, clinical training is available in the provision of anaesthesia in the following areas:

- Obstetric Anaesthesia and Analgesia
- Paediatric Anaesthesia
- Neuro-anaesthesia
- Anaesthesia for Spinal Surgery
- Thoracic / Upper GI Anaesthesia
- Cardiac Anaesthesia (to ST4 level)
- Anaesthesia for Orthopaedics
- Anaesthesia for trauma surgery
- Ophthalmic Anaesthesia
- Maxillofacial Anaesthesia
- Anaesthesia for Head and Neck surgery
- Anaesthesia for ENT surgery
- Emergency Anaesthesia

General surgery including breast surgery
Anaesthesia for Hepatobiliary surgery
Vascular anaesthesia
Anaesthesia for Plastic and Burns surgery
Anaesthesia for Urology and Gynaecology
Anaesthesia for Colorectal surgery
Anaesthesia for Day Case surgery
Anaesthesia for Radiological procedures
Regional anaesthesia techniques

Clinical Training is also available in:

Adult Intensive Care Medicine
Acute and Chronic Pain Management
Advanced Airway Management
Simulation and Teaching

DERBY HOSPITALS NHS FOUNDATION TRUST

The Trust has achieved 3 star status 5 times, & was successful in its application to become a first wave NHS Foundation Trust from July 2004. Recognised by the DoH as a high performing Trust (Healthcare Commission ratings 2008).

Offering a full range of acute & maternity services & with a total of 1,187 acute beds we serve a population of over half a million people throughout Southern Derbyshire. With the Derby Burton Cancer network this rises to 700,000. A brand new £333 million super hospital, the Royal Derby Hospital, opened fully in May 2009, employing 7,000 staff with an annual budget of over £330 million, this year the Trust will treat & care for over 180,000 people as inpatients, emergency patients & day case patients, equating to around 625,000 patient visits.

Alongside the new hospital is Derby Medical School, a graduate entry satellite school of the University of Nottingham, opened in 2003. The Trust also has strong links with the Universities of Derby & Loughborough. The Academic Division of Midwifery is on site & we are also a centre for one of two Schools of Radiography within the Trent region, a Pharmacy Academic Practice Unit & a National Demonstration Centre for Rehabilitation.

Our commitment to continuing education & training is demonstrated by the development of the multi-disciplinary purpose built Education Centre; that has brought together the latest facilities & teaching techniques under one roof & helps to strengthen our academic links.

Royal Derby Hospital provides all acute services including integrated medicine, surgery, obstetrics & gynaecology, oncology, critical care, accident & emergency, rehabilitation services & a full range of support services, including a breast screening unit, imaging, pathology & psychology services. The new hospital incorporates state-of-the-art facilities & equipment – including the region's first helipad.

THE WORK OF THE ANAESTHETIC DIRECTORATE

The directorate of anaesthesia provide services for routine and emergency surgery, cover for the Intensive Care Unit and Pain Management Programmes, including an Acute Pain Service. It also provides anaesthetic cover for the Accident and Emergency Department as required.

Clinical Training Opportunities

Clinical training is available in the provision of anaesthesia in the following areas:

- Obstetric Anaesthesia and Analgesia
- Paediatric Anaesthesia and high dependency
- Anaesthesia for Orthopaedics
- Anaesthesia for trauma surgery
- Ophthalmic Anaesthesia
- Maxillofacial Anaesthesia
- Anaesthesia for ENT surgery
- Emergency Anaesthesia
- General surgery including breast surgery
- Vascular anaesthesia

Anaesthesia for Urology and Gynaecology
Anaesthesia for Colorectal surgery
Anaesthesia for Day Case surgery
Anaesthesia for Hand surgery
Anaesthesia for Bariatric surgery
Anaesthesia for Radiological procedures
Regional anaesthesia techniques

Clinical Training is also available in:

Adult Intensive Care Medicine
Acute and Chronic Pain Management
Advanced Airway Management

KING'S MILL HOSPITAL, SUTTON-IN-ASHFIELD

The King's Mill Centre is a 580 bed hospital in north Nottinghamshire situated on the outskirts of Mansfield. King's Mill has received substantial investment to develop its facilities. Phase III of the development programme, a replacement for all services formerly based at Mansfield District General Hospital including the Accident and Emergency and Intensive Care Unit, was opened in September 1992. There is an exciting ongoing major building and development programme.

Acute services are provided for the Mansfield area with over 50,000 new patients seen every year in the Emergency Department. There are 8 operating theatres on site and an additional 2 day case theatres. There is a busy Obstetric unit and 4 critical care beds.

The hospital has a post-graduate education centre and a well stocked medical library.

THE WORK OF THE ANAESTHETIC DEPARTMENT

The department of anaesthesia provide services for routine and emergency surgery across the hospital site, cover for the Intensive Care Unit and Pain Management Programmes, including an Acute Pain Service. It also provides anaesthetic cover for the Accident and Emergency Department as required.

Clinical Training Opportunities

Clinical training is available in the provision of anaesthesia in the following areas:

- Obstetric Anaesthesia and Analgesia
- Anaesthesia for Orthopaedics
- Anaesthesia for trauma surgery
- Ophthalmic Anaesthesia
- Maxillofacial Anaesthesia
- Anaesthesia for ENT surgery
- Emergency Anaesthesia
- General surgery
- Anaesthesia for Urology and Gynaecology
- Anaesthesia for Colorectal surgery
- Anaesthesia for Day Case surgery

Clinical Training is also available in:

- Adult Intensive Care Medicine (not at the higher level)
- Acute and Chronic Pain Management

APPENDIX 4

LINCOLN COUNTY HOSPITAL

Lincoln is a pleasant cathedral city. Lincoln County Hospital is the main hospital centre for Lincolnshire. The hospital is situated near the historic cathedral quarter. It is a newly developed large and modern complex which caters for most of the major specialities.

The anaesthetic department has 31 consultants including 9 dedicated intensivists. The theatre complex comprises 10 theatres with 3 dedicated to Orthopaedic Surgery and a further two gynaecology theatres. There is an Ophthalmic Unit, an Adult Day Care Unit and a brachytherapy unit.

The Intensive Care Unit presently has 20 beds and provides a full range of support including haemofiltration. Nine consultants have designated ICU sessions. There is a separate intensive care consultant on-call rota.

The Maternity Service is housed in a separate wing. It has 35 ante and postnatal beds, 10 delivery beds and 24 Special Care infant cots. There are over 3,000 deliveries per annum. Anaesthetic provision includes an on-request epidural service for pain relief in labour and assistance with the high dependency care of sick obstetric patients. The Maternity Wing also houses the gynaecological wards with 34 beds and two operating theatres, plus an 8-bedded day case unit.

The Anaesthetic Department runs Acute and Chronic Pain Services.

There is a Postgraduate Medical Education Centre with an excellent Medical Library which serves all medical personnel in Lincolnshire. A fully qualified librarian is in charge and there are borrowing facilities with the British Library and two subscription libraries.

There are extensive computing facilities both in the library and in the Anaesthetic Department.

THE WORK OF THE ANAESTHETIC DEPARTMENT

The department of anaesthesia provide services for routine and emergency surgery, cover for the Intensive Care Unit and Pain Management Programmes, including an Acute Pain Service. It also provides anaesthetic cover for the Accident and Emergency Department as required.

Clinical Training Opportunities

- Obstetric Anaesthesia and Analgesia
- Anaesthesia for Spinal Surgery
- Anaesthesia for Orthopaedics
- Anaesthesia for Trauma surgery
- Ophthalmic Anaesthesia
- Maxillofacial Anaesthesia
- Anaesthesia for Head and Neck surgery
- Anaesthesia for ENT surgery
- Emergency Anaesthesia
- General surgery including breast surgery
- Vascular anaesthesia
- Anaesthesia for Urology and Gynaecology
- Anaesthesia for Colorectal surgery

Anaesthesia for Day Case surgery
Anaesthesia for Radiological procedures
Regional anaesthesia techniques

Clinical Training is also available in:

Adult Intensive Care Medicine
Acute and Chronic Pain Management
Advanced Airway Management
Medical Management