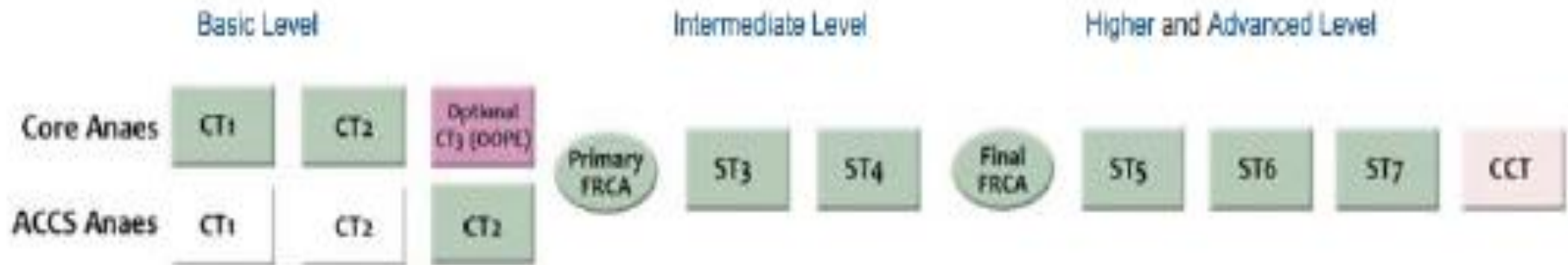


Teaching Experience of Anaesthetic Specialty Trainees

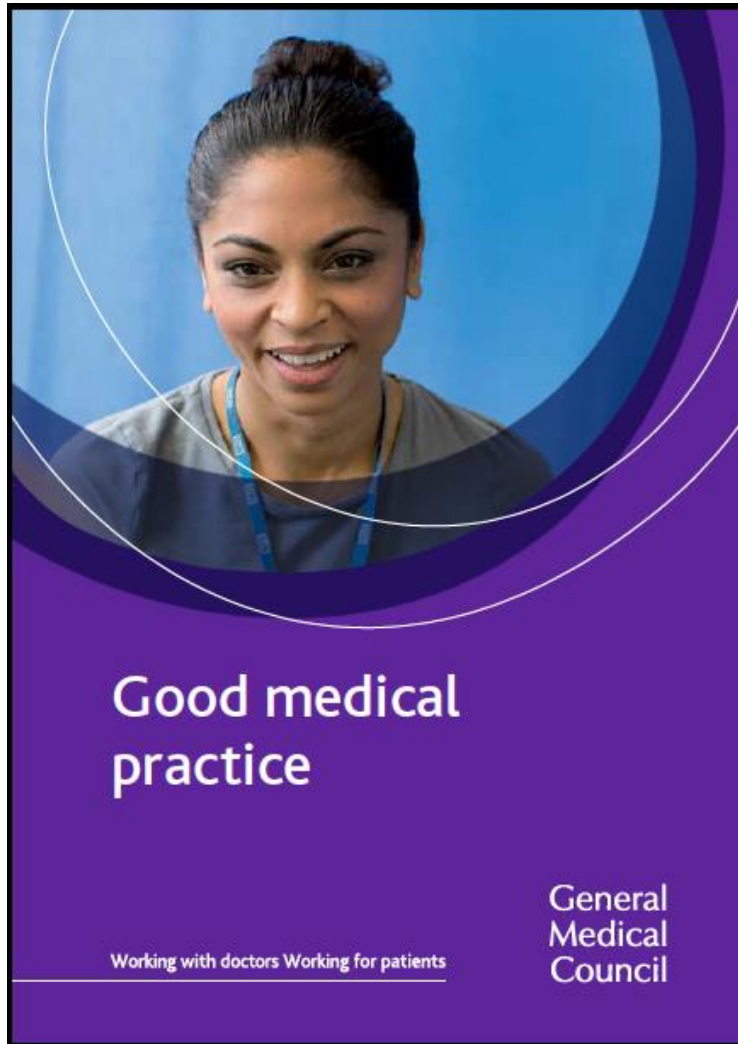
Dr L Elgie, ST5, Barts' & London School of Anaesthesia

Dr B Krishnachetty, Consultant Anaesthetist, Southend University Hospital

Background and Structure of Training in Anaesthesia



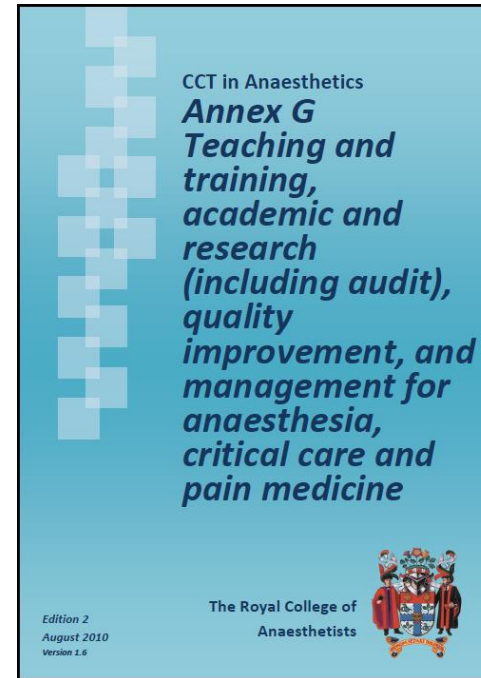
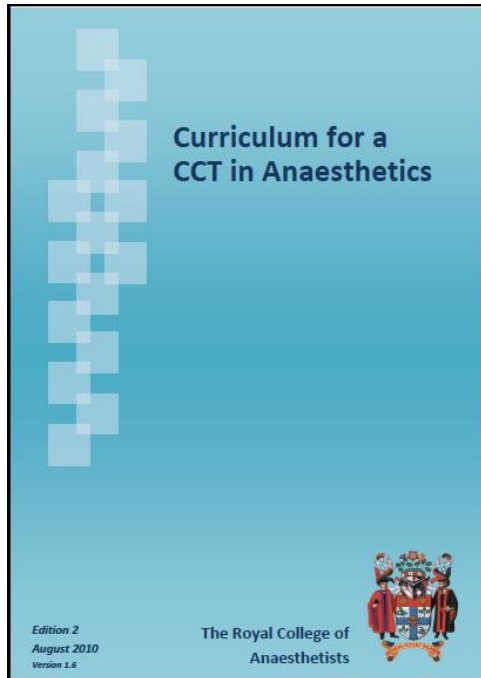
Good Medical Practice



- 39** You should be prepared to contribute to teaching and training doctors and students

- 42** You should be willing to take on a mentoring role for more junior doctors and other healthcare professionals

Anaesthetics Curriculum



Trainees as trainers

By the time they complete their CCT programme trainees must have learnt to assume responsibility for the supervision of more junior trainees. As part of their preparation for becoming a consultant, senior trainees should have the opportunity to contribute to the organisation and delivery of formal training under the supervision of the College Tutor or other designated trainers as identified in this curriculum [Section 6](#).

Intermediate Level

On completion of the Intermediate level competencies the trainee will have enhanced insight into their own educational responsibilities as a Specialty Trainee. They will understand the importance of patient safety in relation to clinical supervision as they will now be directly supervising other trainees. By developing an understanding of the importance of team-based or inter-professional education they will also have developed increased awareness of their role in training others. In support of developing these capabilities trainees will have developed the necessary skills to receive and give effective developmental feedback to others. The intermediate level sees the trainee develop the necessary skills and insight to develop personally as an educator but also to contribute effectively to team-based, inter-professional education. In addition they will participate more actively in departmental teaching and must be able to plan and deliver effective presentations showing evidence of satisfactory preparation. Their progress should be recorded in their portfolio and where they have presented formal sessions they should obtain written feedback from the audience.

Higher/Advanced Level [For all trainees]

Upon completion of the higher-level competencies in medical education the senior trainee will be prepared for their role as an effective clinical educator. They must be ready to take on the responsibility of clinical teaching, supervision and assessment in a career grade post in anaesthesia. Learning in this area continues throughout ST years 5, 6 and 7.

It is essential that trainees at this level be allocated as teacher on teaching lists with more junior colleagues in order to get experience of clinical supervision. They should keep a log of the lists on which they provide clinical supervision, including feedback from the trainees supervised.

All trainees must teach in a variety of settings that must include opportunistic clinical teaching, tutorial/seminars and formal lectures. Their portfolio must include their reflections and the audience feedback relating to several such episodes. They will have trainee insight into generic professional capabilities and skills in important areas such as human factors and crisis resource management. Simulation techniques will be important in providing safe learning opportunities for individuals and teams and they will be able to participate in simulator based training sessions.

They will be able to perform workplace-based assessments reliably and understand their responsibilities in terms of patient safety in the context of clinical and educational supervision. They will have knowledge of the many diverse roles and responsibilities of clinical educators and the educational governance framework within which they work, explicitly the role of the GMC, NHS employing organisations, the Deaneries and the role of the College. They will have a commitment to ensuring their ongoing continuing professional development in the field of medical education.

Every trainee must provide the ARCP with evidence of training in education in line with the minimum learning outcomes. This will often include attendance at suitable 'How To Teach' events. Attendance at external courses is not necessary where suitable local teaching is available and has been approved by the School of Anaesthesia.

Aims

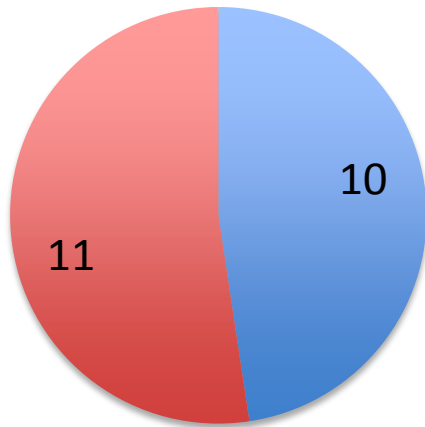
- Explore the teaching experience of Specialty Trainees (STs) at the Barts' & London School of Anaesthesia (BLSA)
- Consider how training in delivering teaching can be improved

Methods

- Anonymous online survey link emailed to STs at BLSA via their College Tutors
- 22 responded (6 ST3/4; 16 ST5+)

Results

1) Do you have any qualifications in teaching?



■ Yes
■ No

Examples

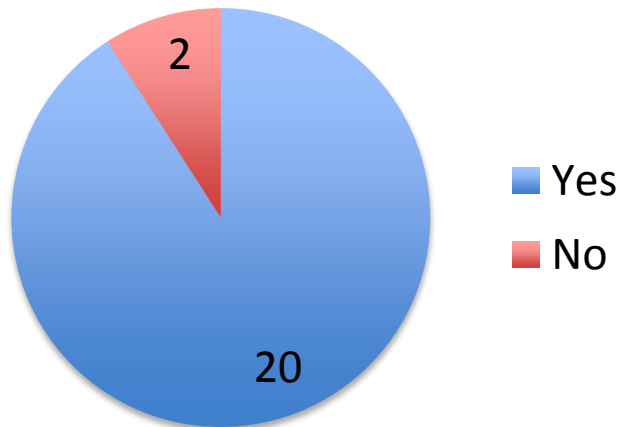
ALS/NLS instructor

Train the Trainer

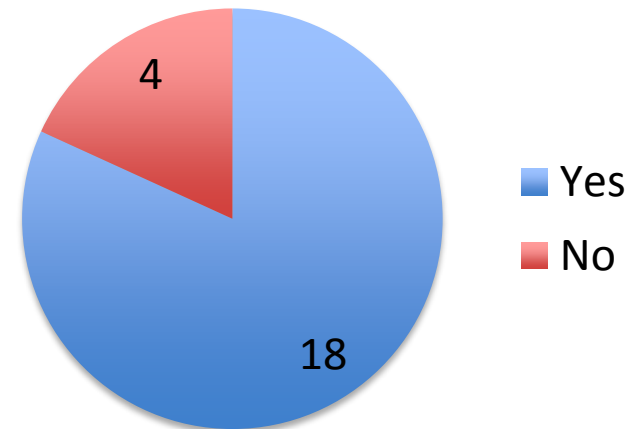
Royal College of Anaesthetists Courses

PG Cert Med Ed

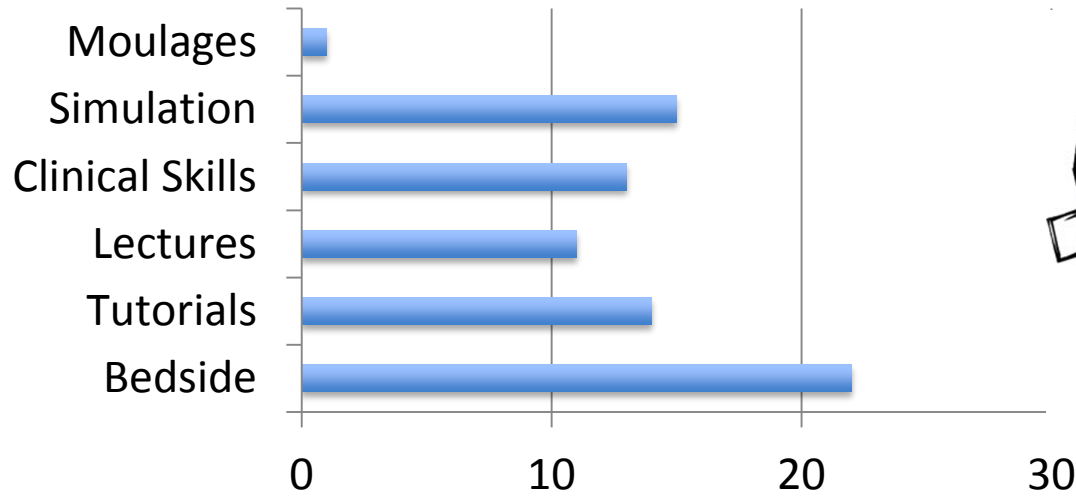
2) Is teaching junior colleagues part of your role as an anaesthetic registrar?



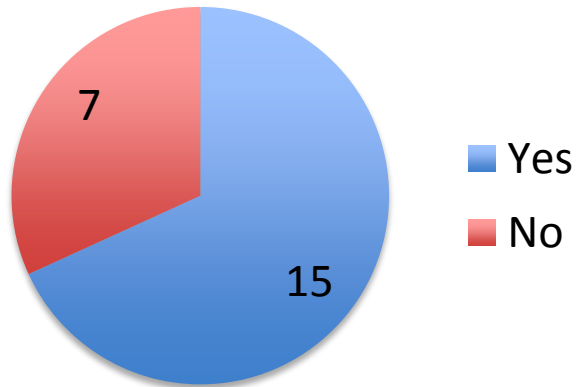
3) Is teaching medical students part of your role as an anaesthetic registrar?



4) What form does your teaching take?



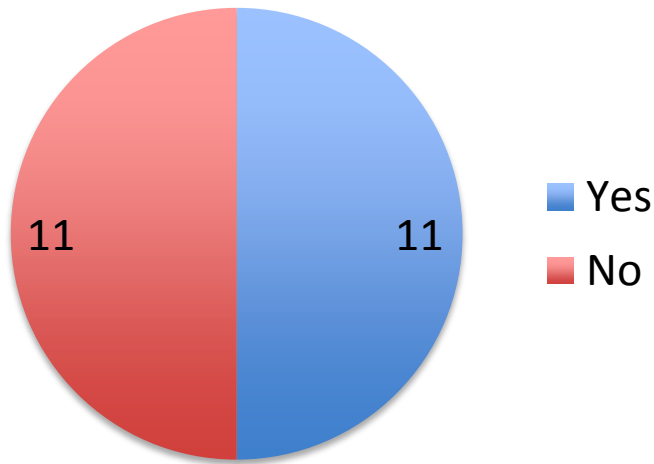
5) Do you sign off WPBAs?



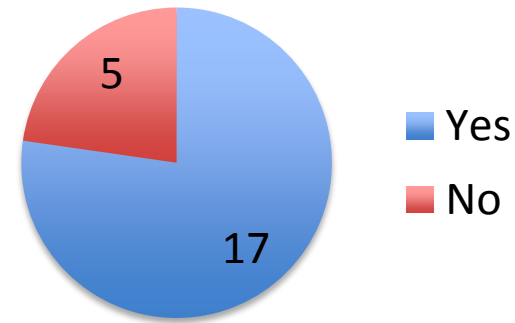
If yes, what training have you had?

- 5 e-learning
- 5 face-to-face
- 2 no training
- 3 no response

6) Do you feel well trained as a teacher?



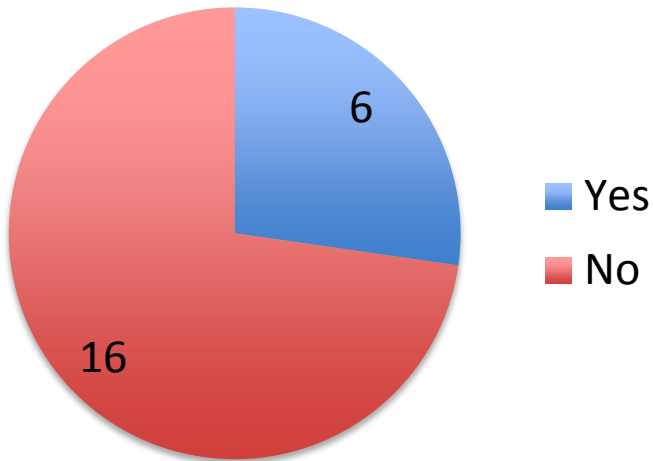
7) Would you benefit from further training on how to teach?



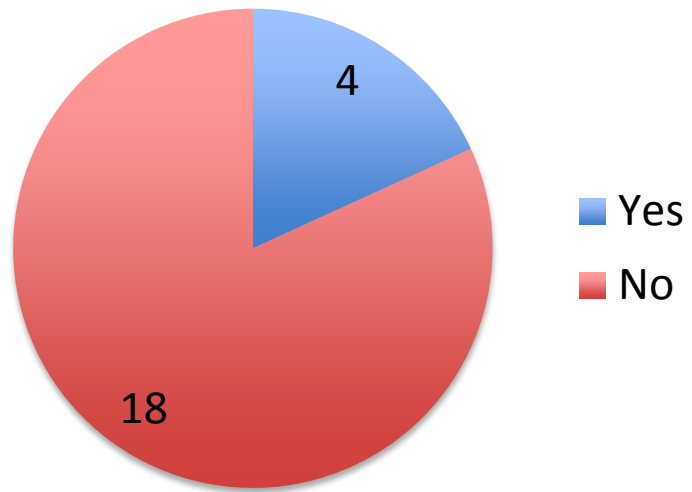
If yes in what form?

- Being taught how to supervise
- How to respect trainees' independence whilst maintaining patient safety
- Courses and supervised teaching
- How to give better feedback to trainees
- How to know what level of knowledge to expect from trainees and students
- Formal sessions on teaching theory
- This should be integrated into our training

8) Are you allocated on enough lists where you are supervising a junior colleague?



9) Is enough emphasis being placed on you developing teaching skills?



Conclusions

- All respondents delivered teaching
- 77% would benefit from further training in how to teach
- 73% felt they were not allocated on enough theatre lists where they are teaching/ supervising
- 82% felt insufficient emphasis was placed on the development of their teaching skills
- Training on how to deliver teaching and supervise may benefit STs and could be prioritised more during the working day and by attending formal sessions

Response from Training Programme Director (TPD)

- London Deanery Faculty Development website
- Certificate in Learning & Teaching at QMUL
- OOP for teaching/education Masters
- Simulation Fellow post in programme
- Opportunities to teach in the simulation centres and attend TTT courses
- Education Fellow posts
- Post-Fellowship teaching days on education
- Study leave to go on courses in education
- Journal clubs and department meetings
- UCLP courses

TPD Suggestions for Improvement

- Building in opportunities for trainees to teach junior colleagues within the working week
- Giving feedback to trainees when they present at journal club or department meetings
- Ensuring Clinical Supervisors are adequately trained as teachers

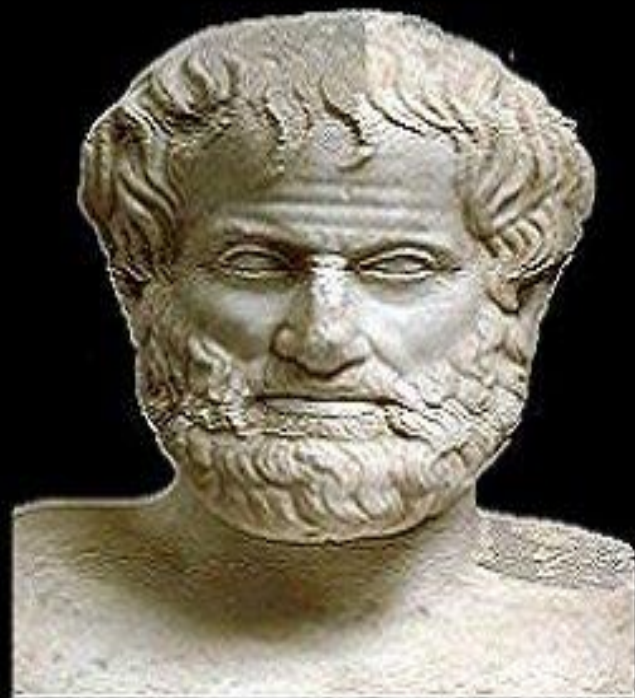
Discussion

- Limitations
 - Small numbers
 - Single region
 - Single specialty
 - Combined Intermediate & Higher Trainee results
- How to improve
- What happens in other specialties

References

1. General Medical Council (2013) *Good Medical Practice* London, General Medical Council, paragraphs 39 & 42.
2. The Royal College of Anaesthetists (2010) *CCT in Anaesthetics – Teaching & Training, Academic & research (including audit) & Management for Anaesthesia, Critical Care & Pain Medicine (Annex G)*.
3. Walsh K, Ahern S, Condon E, O'Connor M, O'Callaghan S. Anaesthetic specialist registrars in Ireland: current teaching practices and perceptions of their role as undergraduate teachers. *European Journal of Anaesthesiology* 2004 Oct; 21(10): 824-8.

*"FOR THE THINGS WE HAVE TO LEARN
BEFORE WE CAN DO THEM,
WE LEARN BY DOING THEM."*



ARISTOTLE, THE NICOMACHEAN ETHICS