



Royal College of Anaesthetists

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Remedial Time for Dual Trainees

Background

Over the last few months the Training team has received a number of requests for guidance regarding arrangements for dual Anaesthetic/ICM trains who fail to pass the Final FRCA after 24 months (or 30 months for trainees appointed from August 2016) of intermediate level training; the issue being whether such trainees enter extended training time in anaesthesia or can undertake elements of ICM CCT training to count towards the Step 1 ICM programme instead.

This issue was discussed at the November 2016 Training Committee meeting. The extract from the minutes are:

“Committee members agreed that if a trainee is in extended anaesthetic training time, the trainee should continue in an anaesthetic placement as this is more conducive to providing the support required to pass the FRCA. It was recognised however that local discretion is required and that this issue should be discussed in the Training workshop at the RAs meeting on 17 November to reach a consensus.”

However, following wider discussion at the November 2016 RAs meeting, the consensus view was that dual trainees who have not yet passed the Final FRCA exam in its entirety can continue with elements of ICM CCT training. The College is unable to mandate this and so the approach taken would be left to local decisions, noting that any short-notice changes to a training programme would be logistically impossible to action and three months' notice is realistically needed.

Issue

Recently however, concerns have been raised that by virtue of being allocated to an ICM rotation at the end of ST4, and putting anaesthetic training time on hold while still being eligible to sit the Final FRCA exams, dual Anaesthetic/ICM trainees are effectively able to take more time to pass the Final FRCA.

Procedure

The College therefore recommends that whenever an outcome 3 is issued for any reason the trainee stays in that specialty until the issue is resolved with an outcome 1 or 4. Therefore an anaesthetic trainee who hasn't passed the Final FRCA exam by the end of ST4 should go into a remedial post within the anaesthetic rotation.

The converse would be true for someone receiving an outcome 3 in ICM, for whatever reason. In all cases appropriate specialty specific support and guidance should also be provided as part of the process. Although this may be disruptive for rotations it is the only way of managing remedial time and support fairly and effectively. In most cases the unsuccessful outcome should be known prior to the ARCP which will assist planning.