

## Procedural Training Program Information Sheet Anaesthetics Advanced Rural Skills Post (ARSP)

### Specific accreditation requirements

Accreditation for ARSP's is through the Joint Consultative Committee in Anaesthesia (JCCA) and is for a period of three years. Hospitals accredited for junior registrar training by ANZCA are automatically accredited for JCCA training.

Approved training post is for a minimum of 12 months. The curriculum is designed for attachments as follows:

- 12 month attachment to an accredited anaesthetic post; or a
- 9 month attachment to an accredited anaesthetic post plus a 3 month attachment to an accredited rural practice with a significant anaesthetic workload.

The training post may include up to three months in an intensive care unit. Trainees are expected to take on the roles and responsibilities of a junior anaesthetic registrar.

### Training supervision

Each post must have two supervisors, one specialist anaesthetist and a non-specialist or general practitioner anaesthetist. Trainees may be under the supervision of other staff in their day-to-day work activities. It is essential that trainees are exposed to at least two specialist anaesthetists.

One on one teaching should occur in the course of the training. Trainees should be encouraged to attend any educational sessions or programs offered to other anaesthetic staff. Trainees are expected to take responsibility for directing their own learning in the negotiated topics while engaged in unit activities.

Registrars are required to maintain clinical diaries which should be regularly reviewed with their supervisor. Registrars are required to undertake an EMAC, EMST, ELS or APLS course as part of their training or establish a secure position with a future course.

### Learning plans

To ensure that training needs are adequately covered each trainee should develop a learning plan in negotiation with their supervisor. Final plan contents need to include clear learning goals in regards to the ARSP curriculum. The learning plans should be agreed upon and signed by both supervisors and the trainee. It is suggested that reviews and appropriate modifications should be made on a regular basis.

## Curriculum

The topic list provided is a guide to the areas of anaesthesia practice which should be considered for inclusion in the training programs. The determination of topic coverage should be negotiated and documented in the trainees' learning plan.

1. Pre-operative and General Medical Care,
2. General Anaesthesia,
3. Local and conduction Anaesthesia,
4. Care related to Surgery and Anaesthesia,
5. Specific applications of care during Surgery and Anaesthesia,
6. Examples of specific applications of care during Surgery and Anaesthesia,
7. Post-anaesthetic care,
8. Respiratory care,
9. The management of pain,
10. Resuscitation and emergency care.

**Note: Comprehensive ARSP curriculum statement and a learning plan proforma can be obtained by contacting the program manager, Bruce Barling, T: 02 6681 5711 or E: [bruceb@ncgpt.org.au](mailto:bruceb@ncgpt.org.au)**

## Assessment

The assessment should be conducted primarily by the supervisors appointed at the beginning of the training.

Formative assessment is via weekly discussion between registrars and supervisors including review of the trainees' clinical diary and monitoring progress against the curriculum.

Summative assessment is to be performed towards the end of the training period. This includes the completion of a training report jointly by the 2 supervisors. Training report is based on:

- [Unit attachment report](#),
- [60 min viva](#) ,
- [Three case commentaries or an original research project which has been internally moderated by supervisors.](#)

**For more information about this program please contact Program Manager, Bruce Barling, or the Director of Training, Christine Ahern, on T: 02 6681 5711.**