

# 2021 Anaesthetics Curriculum: Guidance for ACCS anaesthetists in training and educational supervisors

## 1 Introduction

This guide is designed to support ACCS anaesthetists in training and educational supervisors in adopting the new Anaesthetics and ACCS curricula. It provides further information on:

- [transition from 2010 to 2021 ACCS Curriculum](#)
- [assessment of ACCS Learning Outcomes \(ACCS LOs\) during ACCS placements](#)
- [assessment of generic professional domains of learning](#)
- [crosslinking evidence across both ACCS and stage 1 Anaesthetics curricula](#)

This guide is intended to complement existing information to support adoption of both curricula. Further information can be found on the ACCS website and RCoA Curriculum resources pages and is referenced in the relevant sections below.

## 2 Transition from 2010 to 2021 ACCS Curriculum

### Curriculum transition documentation requirements for ACCS trainees:

There have been a few enquiries relating to documentation requirements for ACCS anaesthetists in training transitioning from CT1 on the old curriculum to CT2 on the 2021 curriculum. Hopefully this guide should provide clarification.

- Any placements that have been already signed off on the old curriculum do not need to be revisited or re-evidenced.
- As long as an outcome 1 was achieved at ARCP, an ACCS anaesthetist in training entering CT2 does not need to demonstrate any evidence for their CT1 placements. *If, therefore, an outcome 1 was received for an EM/IM year, then no evidence for LO1, LO2 and LO4 will be required in CT2 (for the Anaesthetics/ICM year)*
  - LO1: Care for physiologically stable adult patients presenting to acute care across the full range of complexity
  - LO2: Make safe clinical decisions, appropriate to level of experience, knowing when and how to seek effective support
  - LO4: Care for acutely injured patients across the full range of complexity
- The entrustment levels for each ACCS LO have been set independently and should be achievable within a 6-month placement. This has been done so that the order of the rotations doesn't matter.
- If an ACCS anaesthetist in training enters CT2 with some outstanding competencies to complete from their CT1 ARCP, then this needs to be discussed with their educational supervisor at the start of the year and a specific plan made for how these competencies will be achieved during the CT2 year.
- A video has been produced demonstrating a meeting between an educational supervisor and their ACCS anaesthetist in training who is transitioning from CT1 on the 2010 curriculum to CT2 on the 2021 curriculum. This video explains many of the queries raised. It is available on the Resources section of the ACCS website: [www.accs.ac.uk/2021-curriculum/resources](http://www.accs.ac.uk/2021-curriculum/resources).

## 3 Assessment of ACCS Learning Outcomes during ACCS placements

### ACCS Entrustment Matrix

The ACCS Entrustment Matrix included below demonstrates the supervision/entrustment level for each learning outcome by the end of each ACCS placement.

Most of the ACCS LOs can be addressed during more than one of the ACCS placements, as illustrated in the entrustment matrix. However, some ACCS LOs relate to specifically to one of the placements, such as Anaesthetics in the case of LO7.

The entrustment levels are designed to be achievable for each placement they relate to independently as shown in the matrix below.

<b>ACCS Learning Outcome</b>	<b>EM</b>	<b>IM</b>	<b>Anaes</b>	<b>ICM</b>
1: Care for physiologically stable adult patients presenting to acute care across the full range of complexity	2b	2b		
2: Make safe clinical decisions, appropriate to level of experience, knowing when and how to seek effective support	2a	2a		
3: Identify sick adult patients, be able to resuscitate and stabilise and know when it is appropriate to stop	2b	2b	2b	2b
4: Care for acutely injured patients across the full range of complexity	2a			
5: Deliver key ACCS procedural skills	Refer to clinical ACCS LO 5 table			
6: Deal with complex and challenging situations in the workplace	2a	2a	2a	2a
7: Provide safe basic anaesthetic care including sedation			2b Anaes 2a sedation	
8: Manage patients with organ dysfunction and failure				2a
9: Support, supervise and educate	ES review	ES review	ES review	ES review
10: Participate in research and managing data appropriately	ES review	ES review	ES review	ES review
11: Participate in and promote activity to improve the quality and safety of patient care	ES review	ES review	ES review	ES review

More information about this can be found on the ACCS website: [www.accs.ac.uk](http://www.accs.ac.uk)

## 4 Assessment of generic professional domains of learning

Generic professional domains are present in both the ACCS and stage 1 Anaesthetics curricula and there are areas of shared capabilities across both curricula .

**All ACCS generic professional LOs (9,10, and 11) should be completed by the end of ACCS CT2 year before progressing to Anaesthetics stage 1.**

However, evidence during this period of training should **also be linked** to the relevant Anaesthetics generic professional domains. ACCS LOs 9,10, and 11 correspond to the generic professional domains in 2021 Anaesthetics stage 1, as follows:

- ACCS LO 9: *Support, supervise and educate* links to *Education and Training*
- ACCS LO 10: *Participate in research and managing data appropriately* link to *Research and Managing Data*
- ACCS LO11: *Participate in and promote activity to improve the quality and safety of patient care* link to *Safety and Quality Improvement*.

Individuals should continue to add evidence to the 2021 Anaesthetics generic professional domains in years CT3 and CT4.

**All Stage 1 Anaesthetics generic professional domains must be completed by the end of CT3 year.**

## 5 Crosslinking evidence across both ACCS and stage 1 Anaesthetics curricula

While ACCS anaesthetists in training are completing their ACCS training, much of the experience they gain, and evidence they collect during the 4 ACCS placements, will be relevant to stage 1 training of the Anaesthetics Curriculum.

Individuals are therefore encouraged to consider whether evidence they complete as part of the ACCS Curriculum can also be linked to Anaesthetic Stage 1 training on the Lifelong Learning platform (LLp).

The following table provides guidance for the mapping of ACCS Learning Outcomes to relevant Anaesthetics stage 1 domains of learning.

ACCS LOs	Anaesthetics stage 1 domains of learning
1	<i>Professional Behaviours and Communication</i> <i>Safeguarding</i> <i>Perioperative Medicine and Health Promotion</i>
2	<i>Professional Behaviours and Communication</i> <i>Management And Professional and Regulatory Requirements</i> <i>Team Working</i> <i>Safety And Quality Improvement</i> <i>Perioperative Medicine and Health Promotion</i>
3	<i>Professional Behaviours and Communication</i> <i>Team Working</i> <i>Resuscitation And Transfer</i> <i>Intensive Care</i>
4	<i>Pain</i> <i>Team Working</i>

	<i>Regional Anaesthesia</i>
5	<i>Regional Anaesthesia Practical Procedures</i>
6	<i>Professional Behaviours and Communication Management And Professional and Regulatory Requirements Team Working Safeguarding</i>
7	<i>General Anaesthesia Regional Anaesthesia Pain Procedural Sedation</i>
8	<i>Team Working Resuscitation and Transfer Intensive Care</i>
9	<i>Education and Training</i>
10	<i>Research and Managing Data</i>
11	<i>Professional Behaviours and Communication Safety and Quality Improvement</i>

ACCS anaesthetists in training will already have a considerable amount of Anaesthetics stage 1 training populated on LLp by the time they progress from ACCS to Anaesthetics Stage 1 training after CT2. Further information on the stage 1 domains of learning can be found on the RCoA website: <https://www.rcoa.ac.uk/documents/2021-curriculum-learning-syllabus-stage-1/introduction>.