

## **ANZCA Handbook for Training and Accreditation**

### **Appendix 4 - Transition arrangements for those already in training at the start of the 2013 hospital employment year**

#### **Overview**

This appendix has been provided to assist trainees who have commenced training prior to the start of the 2013 hospital employment year (HEY).

In the lead up to the transition dates across the various jurisdictions, each trainee's transition status is subject to a preliminary assessment by the College and the trainee advised of the outcome. The terms and conditions governing transition arrangements are specified in [regulation 37.9](#).

In all cases, it is important to note that a trainee's *actual* transition status cannot be finalised until all documentation (that is, in-training assessments, module completion forms, etc.) for the 2012 hospital employment year has been submitted and all outstanding fees paid by the due dates.

ANZCA acknowledges the importance of supporting trainees through the process of transitioning into the revised curriculum. If you have any queries relating to the transition arrangements, please contact the College via [training@anzca.edu.au](mailto:training@anzca.edu.au) so that your inquiry can be directed to the most appropriate person.

As it is important to give a considered response to all inquiries, the College is requesting all inquiries be lodged via email. An initial response or acknowledgement is generally provided within 48 hours. Complex queries may take some days to resolve and may require consideration by the director of professional affairs (assessor). To assist in resolving your query, the College may contact you by telephone to clarify information.

### Core study units and training year

Credit towards or exemption from core study units is based on training time completed under the curriculum established in 2004.

The key requirements for transition into each of the three core study units are set out in the table below:

| Core study unit            | Entry requirements for transition purposes   |
|----------------------------|--|
| Introductory training (IT) | <ul style="list-style-type: none"> <li>• Less than 26 weeks approved clinical anaesthesia training time (including normal leave); and</li> <li>• An employment position within an ANZCA-accredited department.</li> </ul> <p><i>Note: where the supervisor of training determines the trainee has achieved beyond level 1 supervision, the trainee is exempt from the initial assessment of anaesthetic competence (IAAC).</i></p> |
| Basic training (BT)        | <ul style="list-style-type: none"> <li>• Successful completion of at least 26 weeks clinical anaesthesia time (including normal leave) and less than 104 weeks ANZCA basic training;</li> <li>• Authorisation from supervisor of training to work at beyond level 1 supervision; and</li> <li>• An employment position within an ANZCA-accredited department.</li> </ul>   |
| Advanced training (AT)     | <ul style="list-style-type: none"> <li>• Successful completion of two years (104 weeks) approved training time in basic training;</li> <li>• Passed the primary examination;</li> <li>• Completed modules 1 and 3, as well as one of modules 4 to 10; and</li> <li>• An employment position within an ANZCA-accredited department.</li> </ul>  |

While the process for this credit allocation has been devised with consideration towards trainees' learning requirements, it is of necessity an automated process. If any remaining volume of practice (VOP) targets represent experience that trainees have already gained, and cannot easily be repeated, and this experience can be confirmed by their supervisor of training (SOT), there exists an avenue for these volume of practice targets to be modified. All volume of practice targets for the ANZCA Clinical Fundamentals are set with the aim of ensuring that trainees are prepared for the full scope of anaesthetic practice, and supervisors of training are encouraged to consider a trainee's overall training before modifying volume of practice targets.

In order to modify targets the supervisor of training needs to complete a request form, email: [training@anzca.edu.au](mailto:training@anzca.edu.au) and retain a copy of this with evidence of the trainee's prior experience.

For trainees who transition into introductory training, recent anaesthetic experience may be credited; however this does not reduce the minimum time required in introductory training or reduce the volume of practice requirements for cases and procedures or the workplace-based assessment requirements. The primary benefit to the trainee is that it allows the initial assessment of anaesthetic competence to be completed after 13 weeks

and an earlier application to be made for the primary examination. No time is counted towards basic training until all the requirements of the initial assessment of anaesthetic competence and introductory training have been completed.

If the supervisor of training determines it is possible to credit recent anaesthetic experience for a trainee in introductory training, the supervisor of training logs into the training portfolio system (TPS) with the trainee and enters the necessary information against that trainee's profile.

Pro-rata credits towards volume of practice for clinical fundamentals are provided on the basis of the number of weeks of clinical anaesthesia time completed to the start of the 2013 hospital employment year.

The training time recorded in the trainee profile represents *reported* training time. This may or may not be *approved* training time for the purposes of determining the core study units completed as at the commencement of the 2013 hospital employment year and, hence, the trainee's training year within the revised program. A discrepancy between reported and approved training time can arise because the reported training time for a specific training site exceeds the maximum duration permissible for that site, as defined in the ANZCA website.

If it has become apparent to the College that a period of reported training time is in excess of the prescribed maximum duration for a particular training site, the training time is reclassified as interrupted training and deducted from total training time and the relevant sub-classification (for example, clinical anaesthesia time or other clinical time) within the revised curriculum. This may affect the computation of core study units completed and the designated training year at the start of the 2013 hospital employment year.

While extended training time undertaken prior to the 2013 hospital employment year counts towards total training time, it does not assist trainees in progressing through the training program and does not count towards the calculation of the training year at the commencement of the 2013 hospital employment year. Accordingly, extended training time is deducted from the total reported training time in order to determine the core study units completed.

The revised curriculum contains regulations setting out the maximum duration of extended training for each training period. In summary, extended introductory training may not be continued beyond a total period of 26 weeks, extended basic training time beyond 104 weeks, extended advanced training time beyond 156 weeks, and extended provisional fellowship training time beyond 52 weeks.

For transitional purposes, if a trainee has undertaken a period of extended training prior to the start of the 2013 hospital employment year, this extended training (in weeks) does not count towards the calculation of the above maximum durations noted above. In effect, all extended training is deemed to be zero (0) weeks at the start of the 2013 hospital employment year for the purpose of determining whether the maximum durations for each training period are exceeded thereafter.

### ANZCA Clinical Fundamentals

Credit towards the completion of the ANZCA Clinical Fundamentals under the revised curriculum is based on the amount of clinical anaesthesia time completed by the end of the 2012 hospital employment year. While credit does not reduce the length of training, it assists trainees to identify areas where further development is needed and to focus on areas of particular interest.

Trainees receive two types of credit towards clinical fundamentals under the revised curriculum, based on the amount of clinical anaesthesia time completed by the end of the 2012 hospital employment year (HEY):

- Credits towards volume of practice (VOP) requirements for cases and procedures in respect of relevant clinical fundamentals.
- Credits towards workplace-based assessment (WBA) requirements for relevant clinical fundamentals.

The target requirements for volume of practice and workplace-based assessments in relation to the clinical fundamentals are set out in section two of the [curriculum document](#) on the ANZCA website.

In essence, credit towards the volume of practice and workplace-based assessment requirements for the clinical fundamentals is calculated on a pro rata basis of 0.57 per cent per week of approved clinical anaesthesia time completed to the end of the 2012 hospital employment year (HEY). Accordingly, advanced trainees who have accumulated 176 weeks of clinical anaesthesia time by the start of the 2013 hospital employment year receive 100 per cent of all volume of practice credits for clinical fundamentals.

Many of the workplace-based assessment requirements for the core study units, that is, introductory, basic and advanced training, have a target of only one. Trainees will receive credit for these single target workplace-based assessments for the training period into which they transition as long as they have accrued at least one week of time in that period prior to the commencement of the 2013 hospital employment year. This has been done to ensure that no trainee is disadvantaged and in keeping with the premise that the transition arrangements will be simple, clear and generous.

For those trainees who are eligible to receive credit towards the volume of practice and workplace-based assessment requirements, their supervisor of training should meet with them to discuss and agree on the focus of the remaining volume of practice and workplace-based assessment requirements and adjust the targets in the training portfolio system accordingly. For example, if a trainee has gained a significant amount of experience in regional and local anaesthesia, it may be appropriate to refocus the adjusted volume of practice and workplace-based assessment targets to another area.

There are two exceptions to this:

- a. The multi-source feedback workplace-based assessment (MSF) is a component of each core unit review, and as such will be completed at the end of each period of training.
- b. Those trainees who transition into introductory training without documented

beyond level 1 supervision will be required to complete all the workplace-based assessments of the introductory training period as these form a component of the initial assessment of anaesthetic competence (IAAC).

Once the revised curriculum 2013 has begun, all trainees, irrespective of transition credits, will be required to complete a minimum number of workplace-based assessments every three months.

At the initial meeting between trainee and supervisor of training during the first clinical placement in the 2013 hospital employment year, the supervisor of training reviews, in consultation with the trainee, the volume of practice and workplace-based assessment credits received for each clinical fundamental and confirms which clinical fundamentals have been completed and which are outstanding. If a trainee believes there is a significant difference between the credits allocated in the training portfolio system and their clinical experience, the trainee has the opportunity to apply for reconsideration under [regulation 30](#).

#### Modules and specialised study units

Trainees receive two types of credit towards specialised study units under the revised curriculum:

- Credits towards volume of practice (VOP) requirements for cases and procedures in respect of relevant specialised study units.
- Credits towards workplace-based assessment (WBA) requirements for relevant specialised study units.

The target volume of practice and workplace-based assessments requirements for specialised study units are set out in section 3 of the curriculum master document on the ANCZA website. The credits allocated to each trainee in respect of these volume of practice and workplace-based assessment requirements are based on the modules completed prior to the commencement of the 2013 hospital employment year, as set out in the following table.

#### Completed modules – credits granted for equivalent specialised study units

| Mod No. | Completed module (per ANZCA curriculum 2004)    | Credits granted for specialised study units (SSUs) (per ANZCA revised curriculum 2013)  |
|---------|---|---|
| 1       | Introduction to anaesthesia and pain management | <i>The completion of module 1 entitles trainees to receive credit for 25 per cent of the volume of practice and workplace-based assessment requirements for (1) general surgery, urological, gynaecological and endoscopic procedures and (2) orthopaedic surgery SSUs.</i> |
| 2       | Professional attributes                         | <i>Module 2 activities are addressed elsewhere in the revised curriculum and no credits are provided for transition purposes.</i>   |

| Mod No. | Completed module (per ANZCA curriculum 2004)   | Credits granted for specialised study units (SSUs) (per ANZCA revised curriculum 2013)   |
|---------|--|--|
| 3       | Anaesthesia for major and trauma surgery<br><i>(100 per cent credit only if module 1 has also been completed in full).</i> | <i>General surgery, urological, gynaecological and endoscopic procedures (100 per cent credit).<br/>Orthopaedic surgery (100 per cent credit).</i>   |
| 4       | Obstetric anaesthesia and analgesia  | <i>Obstetric anaesthesia and analgesia (100 per cent credit).</i>  |
| 5       | Anaesthesia for cardiac, thoracic and vascular surgery   | <i>Cardiac surgery and interventional cardiology (100 per cent credit).<br/>Thoracic surgery (100 per cent credit).<br/>Vascular surgery and interventional radiology (100 per cent credit).</i> |
| 6       | Neuroanaesthesia   | <i>Neurosurgery and interventional neuroradiology (100 per cent credit).</i>   |
| 7       | Anaesthesia for ear nose and throat, eye, dental and maxillofacial surgery   | <i>Head and neck, ear nose and throat, and dental procedures (100 per cent credit).<br/><br/>Ophthalmic procedures (100 per cent credit).</i>  |
| 8       | Paediatric anaesthesia   | <i>Paediatric anaesthesia (100 per cent credit).</i>   |
| 9       | Intensive care medicine  | <i>Intensive care (100 per cent credit).</i>   |
| 10      | Pain medicine  | <i>Pain medicine is a clinical fundamental under the revised curriculum.</i>   |
| 11      | Education and scientific inquiry   | <i>This module is replaced by a series of scholar role activities. Credits and exemptions are dependent upon the stage of training and status of completion of formal project.</i>               |
| 12      | Professional practice  | <i>Module 12 activities are addressed elsewhere in the revised curriculum and no credits are granted for transition purposes.</i>  |
|         | There is no equivalent module within the 2004 curriculum and no transitional requirements or credits granted.              | <i>Plastic, reconstructive and burns surgery – no credits granted.</i>   |

### Credits for partially completed modules

Trainees who have partially completed modules 3 to 8 prior to the end of the 2012 hospital employment year can receive credits for work they performed to date. The allocation of credits for partially completed modules ensures that trainees and their supervisors have a common view as to the additional activities required to complete the corresponding specialised study unit(s) relating to each module.

In order to claim these credits, a trainee must conduct a self-assessment as to the extent of module completion and discuss this assessment with the appropriate module supervisor. This self-assessment should be done as per the ANZCA 2004 curriculum module guidelines, using the trainee's learning portfolio. The trainee may have logbook data to further corroborate clinical experience.

Further information on the process for assessing partially completed modules and the related credits for specialised study units is available on the ANZCA website.

### Modules 1 and 3

Trainees who have completed clinical modules 1 and 3 are credited with 100 per cent completion of the general surgical, urological, gynaecological and endoscopic procedures specialised study unit and the orthopaedic surgery specialised study unit.

If the trainee is a BTY2 trainee with a minimum of 52 weeks clinical anaesthesia time and has completed module 3 but not module 1, they receive 100 per cent credit for the general surgical, urological, gynaecological and endoscopic procedures specialised study unit and the orthopaedic surgery specialised study unit. All other trainees who have completed module 3, but not module 1, are referred to the director of professional affairs (assessor) for a decision regarding the level of volume of practice and workplace-based assessment credits to be granted.

Trainees who have completed module 1 and partially completed module 3 receive credit for 25 per cent of the volume of practice and workplace-based assessment targets for the general surgical, urological, gynaecological and endoscopic procedures specialised study units and the orthopaedic surgery specialised study unit.

### Module 2

Module 2, which encompasses professional attributes, is incorporated into the ANZCA Roles in Practice, ANZCA Clinical Fundamentals and other related activities in the revised curriculum. Accordingly, there are no specialised study unit equivalents to this module within the revised curriculum and no transition requirements relating to the completion of this module.

### Modules 4 to 9

If a trainee has completed any of modules 4 to 9, this translates to 100 per cent completion for the corresponding specialised study units.

### Module 10

If a trainee has completed module 10 and is in basic training at the commencement of the 2013 hospital employment year, then they are exempt from completing the clinical fundamental volume of practice for pain medicine in basic training, but are required to complete the requirements of the pain medicine clinical fundamental volume of practice relating to advanced training.

If module 10 has been completed and the trainee is in advanced training at the commencement of the 2013 hospital employment year, they are exempt the volume of practice requirements for the entire pain medicine clinical fundamental.

Trainees who, at the start of the 2013 hospital employment year, have partially completed module 10 are allocated credits according to the following criteria:

- Trainees transitioning into introductory training receive no credit if in BTY1 and 25 per cent credit for volume of practice and workplace-based assessments if in BTY2.
- Trainees transitioning into basic training receive no credit if in BTY1 and 25 per cent credit for volume of practice and workplace-based assessments if in BTY2.
- Trainees transitioning into advanced training receive 50 per cent credit for volume of practice and workplace-based assessments if in ATY1 and 75 per cent credit for both if in ATY2.

### Module 11 (including formal project)

Under the revised curriculum, [module 11](#) is being replaced by a series of scholar role activities during basic and advanced training. Additional scholar role activities are required to be undertaken during the provisional fellowship training period.

Scholar role activities are one aspect of a range of scholar role requirements defined in section 1.6 of the curriculum document, located on the ANZCA website. Some of these requirements, such as teaching skills, are assessed via multi-source feedback, the clinical placement review questionnaire and other assessment mechanisms that do not form part of the exemptions granted as a result of completing module 11.

Trainees can gain exemption from scholar role activities in the revised curriculum on the basis of their training year at the time of transition and the extent of completion of module 11. Trainees commencing ANZCA training from the start of the 2013 hospital employment year onwards are permitted to apply for exemption from option B activities only.

The transition arrangements for the scholar role activities are explained in [Regulation 37 Training in anaesthesia leading to FANZCA, and accreditation of facilities to deliver this curriculum](#), as well as in the summary table on the following page.

In addition, trainees who transitioned at the start of the 2013 hospital employment year are eligible to receive credit toward the scholar role volume of practice (VOP) requirements, as described below:

1. Trainees to whom regulations 37.9.2.8, 37.9.3.8 and 37.9.4.8 apply (including those who complete a previously approved proposed project) are permitted to apply to the Scholar Role Sub-Committee for exemption from option A or B activities, based either on a completed formal project or other research/university study allowed for module 11. The outcome of such an exemption is wholly at the discretion of the sub-committee. Trainees who received approval to complete a formal project, will only receive the applicable credit toward the scholar role activities at the time that their completed formal project is submitted to and approved by the College.
2. All trainees who transitioned from the 2004 to the 2013 curriculum will be provided with credit toward the scholar role volume of practice requirement to “participate in existing quality assurance programs; may include clinical audit, critical incident monitoring, morbidity and mortality meetings (20)” in the manner of two meetings for every 26 weeks approved vocational training completed to the end of the 2012 hospital employment year, excluding extended or interrupted training.



3. All trainees who transitioned from the 2004 to the 2013 curriculum will be provided with credit toward the scholar role volume of practice requirement to “attend regional or greater conferences/meetings (2)” as per the following calculations per weeks of approved vocational training completed to the end of the 2012 hospital employment year, excluding extended or interrupted training:
- 26 weeks - 0.2 credit = 0 credit.
  - 52 weeks - 0.4 credit = 0 credit.
  - 78 weeks - 0.6 credit = 1 credit.
  - 104 weeks - 0.8 credit = 1 credit.
  - 130 weeks - 1.0 credit = 1 credit.
  - 156 weeks - 1.2 credit = 1 credit.
  - 182 weeks - 1.4 credit = 1 credit.
  - 208 weeks - 1.6 credit = 2 credits.
  - 234 weeks - 1.8 credit = 2 credits.
  - 260 weeks - 2.0 credit = 2 credits.

| Training status   | Required to complete   | Applicable exemptions  |
|---|--|--|
| Commenced ANZCA training (introductory training) at the start of the 2013 hospital employment year or transitioned to introductory training or basic training without a formal project completed, exemption from or approval to complete. | <ul style="list-style-type: none"> <li>• Teach a skill (with evaluation, feedback and reflection).</li> <li>• Facilitate a small group discussion or run a tutorial (with evaluation, feedback and reflection).</li> <li>• Plus either:               <ul style="list-style-type: none"> <li>○ Option A (all activities).</li> <li>○ Option B (one activity).</li> </ul> </li> </ul> | Trainees may apply for exemption from option B activities only, based on previously completed research or postgraduate study. The outcome of a request for exemption is at the discretion of the Scholar Role Sub-Committee. |

| Training status   | Required to complete  | Applicable exemptions  |
|---|---|--|
| <p>Transitioned to introductory training with a formal project complete or exemption from or approval to complete.</p> <ul style="list-style-type: none"> <li>37.9.2.8 Trainees transitioning into introductory training who at the start of the 2013 hospital employment year have had a formal project approved, or a proposal approved by their formal project officer, or who have undertaken work qualifying for exemption from the formal project, may be exempt (when the formal project has been signed off) from scholar role activities required to be completed by the end of basic training, but must complete those required to be completed by the end of advanced training and provisional fellowship training, with the exception that they do not have to complete an audit and provide a written report for external assessment by the Scholar Role Panel (Sub-Committee).<br/>If they have not yet completed the requirements of module 11 under previous regulations, they must complete all scholar role activities required to be completed by the end of basic training, advanced training and provisional fellowship training.</li> </ul> | <ul style="list-style-type: none"> <li>Teach a skill (with evaluation, feedback and reflection).</li> <li>Facilitate a small group discussion or run a tutorial (with evaluation, feedback and reflection).</li> <li>Plus either: <ul style="list-style-type: none"> <li>Option A (one activity only): <ul style="list-style-type: none"> <li>Critically appraise a topic for internal evaluation and present it to the department.</li> </ul> </li> <li>Option B: <ul style="list-style-type: none"> <li>One of any of the five activities.</li> </ul> </li> </ul> </li> </ul> | <p>Exempt from:</p> <ul style="list-style-type: none"> <li>Critically appraise a paper published in a peer-reviewed indexed journal for internal assessment.</li> <li>Complete an audit and provide a written report for external assessment by the Scholar Role Sub-Committee.</li> <li>Trainees in this position may apply to the Scholar Role Sub-Committee for exemption from the remaining option A activity or an option B activity, based either on their completed formal project, or previous study/research allowed for module 11. The outcome of such a request is at the discretion of the sub-committee.</li> </ul> <p><i>If a trainee previously received approval for a proposed formal project (before the end of the 2012 hospital employment year) but has not yet completed the project, they must complete it by the end of provisional fellowship training and have it signed off, to be exempt from the critical appraisal of a paper and the audit.</i></p> |

| Training status   | Required to complete  | Applicable exemptions  |
|---|---|--|
| <p>Transitioned to basic training with a formal project complete or exemption from or approval to complete.</p> <ul style="list-style-type: none"> <li>37.9.3.8 Trainees transitioning into basic training who at the start of the 2013 hospital employment year have had a formal project approved, or a proposal approved by their formal project officer, or who have undertaken work qualifying for exemption from the formal project, may be exempt (when the formal project has been signed off) from scholar role activities required to be completed by the end of basic training, but must complete those required to be completed by the end of advanced training and provisional fellowship training, with the exception that they do not have to complete an audit and provide a written report for external assessment by the Scholar Role Panel (Sub-Committee).<br/>If they have not yet completed the requirements of module 11 under previous regulations, they must complete all scholar role activities required to be completed by the end of basic training, advanced training and provisional fellowship training.</li> </ul> | <ul style="list-style-type: none"> <li>Teach a skill (with evaluation, feedback and reflection).</li> <li>Facilitate a small group discussion or run a tutorial (with evaluation, feedback and reflection).</li> <li>Plus either: <ul style="list-style-type: none"> <li>Option A: <ul style="list-style-type: none"> <li>Critically appraise a topic for internal evaluation and present it to the department.</li> </ul> </li> <li>Option B: <ul style="list-style-type: none"> <li>One of any of the five activities.</li> </ul> </li> </ul> </li> </ul> | <p>Exempt from:</p> <ul style="list-style-type: none"> <li>Critically appraise a paper published in a peer-reviewed indexed journal for internal assessment.</li> <li>Complete an audit and provide a written report for external assessment by the Scholar Role Panel (Sub-Committee).</li> <li>Trainees in this position may apply to the Scholar Role Sub-Committee for exemption from the remaining option A activity or an option B activity, based either on their completed formal project, or previous study/research. The outcome of such a request is at the discretion of the sub-committee.</li> </ul> <p><i>If a trainee previously received approval for a proposed formal project (before the end of the 2012 hospital employment year) but has not yet completed the project, they must complete it by the end of provisional fellowship training and have it signed off, to be exempt from the critical appraisal of a paper and the audit.</i></p> |

| Training status   | Required to complete  | Applicable exemptions  |
|---|---|--|
| <p>Transitioned to advanced training with a formal project complete or exemption from or approval to complete.</p> <ul style="list-style-type: none"> <li>37.9.4.8 <i>Trainees transitioning into advanced training, who at the start of the 2013 hospital employment year have had module 11 signed off under previous regulations will be exempt the scholar role activity required to be completed by the end of provisional fellowship training. If they have not yet completed the requirements of module 11 under previous regulations they may elect to either complete those requirements or to fully complete the scholar role activities required to be completed by the end of advanced training and provisional fellowship training under this regulation, with the exception that all trainees who complete training after the start of the 2014 hospital employment year (including those trainees who elect to complete module 11) must complete the first two items for scholar role activities:</i> <ul style="list-style-type: none"> <li><i>Teach a skill (with evaluation, feedback and reflection).</i></li> <li><i>Facilitate a small group discussion or run a tutorial (with evaluation, feedback and reflection).</i></li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>If module 11 completed before the start of the 2013 hospital employment year and trainee due to finish training by the end of the 2013 hospital employment year: <ul style="list-style-type: none"> <li>Nil further activities.</li> </ul> </li> <li>If module 11 is complete and trainee is due to finish training during the 2014 hospital employment year or thereafter: <ul style="list-style-type: none"> <li>Teach a skill (with evaluation, feedback and reflection).</li> <li>Facilitate a small group discussion or run a tutorial (with evaluation, feedback and reflection).</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>Exempt from all option A and B.</li> </ul> <p><i>If a trainee previously received approval for a proposed formal project (before the end of the 2012 hospital employment year) but has not yet completed the project, they must complete it by the end of provisional fellowship training and have it signed off to be exempt from the critical appraisal of a topic and the audit.</i></p> |

| Training status  | Required to complete   | Applicable exemptions  |
|--|--|--|
| <p>Transitioned to advanced training without a formal project completed, exemption from or approval to complete.</p> <ul style="list-style-type: none"> <li>37.9.4.8 Trainees transitioning into advanced training, who at the start of the 2013 hospital employment year have had module 11 signed off under previous regulations will be exempt the scholar role activity required to be completed by the end of provisional fellowship training. If they have not yet completed the requirements of module 11 under previous regulations they may elect to either complete those requirements or to fully complete the scholar role activities required to be completed by the end of advanced training and provisional fellowship training under this regulation, with the exception that all trainees who complete training after the start of the 2014 hospital employment year (including those trainees who elect to complete module 11) must complete the first two items for scholar role activities: <ul style="list-style-type: none"> <li>Teach a skill (with evaluation, feedback and reflection).</li> <li>Facilitate a small group discussion or run a tutorial (with evaluation, feedback and reflection).</li> </ul> </li> </ul> | <ol style="list-style-type: none"> <li>If module 11 is incomplete and trainee elects to complete module 11 and is due to finish training by the end of the 2013 hospital employment year: <ul style="list-style-type: none"> <li>Must complete all requirements of module 11 as stipulated under the 2004 curriculum.</li> </ul> </li> <li>If module 11 is incomplete and trainee elects to complete module 11 and is due to finish training during the 2014 hospital employment year or thereafter: <ul style="list-style-type: none"> <li>Must complete all requirements of module 11 as stipulated under the 2004 curriculum plus. <ul style="list-style-type: none"> <li>Teach a skill (with evaluation, feedback and reflection).</li> <li>Facilitate a small group discussion or run a tutorial (with evaluation, feedback and reflection).</li> </ul> </li> </ul> </li> <li>If module 11 is incomplete and trainee elects to complete scholar role activities instead and is due to finish training by the end of the 2013 hospital employment year: <ul style="list-style-type: none"> <li>Option A: <ul style="list-style-type: none"> <li>Critically appraise a topic for internal evaluation and present it to the department.</li> <li>Complete an audit and provide a written report for external assessment by the Scholar Role Sub-Committee.</li> </ul> </li> <li>Option B: <ul style="list-style-type: none"> <li>One of any of the five activities.</li> </ul> </li> </ul> </li> <li>If module 11 is incomplete and trainee elects to complete scholar role activities instead and is due to finish training during the 2014 hospital employment year or thereafter: <ul style="list-style-type: none"> <li>Teach a skill (with evaluation, feedback and reflection).</li> <li>Facilitate a small group discussion or run a tutorial (with evaluation, feedback and reflection).</li> <li>Option A: <ul style="list-style-type: none"> <li>Critically appraise a topic for internal evaluation and present it to the department.</li> <li>Complete an audit and provide a written report for external assessment by the Scholar Role Sub-Committee.</li> </ul> </li> <li>Option B: <ul style="list-style-type: none"> <li>One of any of the five activities</li> </ul> </li> </ul> </li> </ol> | <p>If a trainee has not previously had module 11 signed off and they choose to complete the scholar role activity instead of module 11 (and they will finish training within the 2013 hospital employment year), they are exempt the following:</p> <ul style="list-style-type: none"> <li>Teach a skill (with evaluation, feedback and reflection).</li> <li>Facilitate a small group discussion or run a tutorial (with evaluation, feedback and reflection).</li> <li>Critically appraise a paper published in a peer-reviewed indexed journal for internal assessment.</li> </ul> <p>If a trainee has not previously had module 11 signed off and they choose to complete the scholar role activity instead of module 11 (and they will finish training after the start of the 2014 hospital employment year) they are exempt the following:</p> <ul style="list-style-type: none"> <li>Critically appraise a paper published in a peer-reviewed indexed journal for internal assessment.</li> </ul> <p>All trainees who transitioned to advanced training with module 11 incomplete and who choose to complete the scholar role activities, may apply to the Scholar Role Sub-Committee for exemption from option A or B activities, based on previous study/research they may have completed and which would have met the requirements for module 11. The outcome of such a request is at the discretion of the sub-committee.</p> |

| Training status   | Required to complete   | Applicable exemptions |
|---|--|-----------------------|
| <p>Trainees transitioning into provisional fellowship training but under previous regulations with a formal project completed, exemption from or approval to complete.</p> <p><i>37.9.6.4 Trainees transitioning at the start of the 2013 hospital employment year into ATY3 or a provisional fellowship program, who have completed module 11 under previous regulations, will have no further scholar role activity requirements to fulfill. Those trainees transitioning into ATY3 or a provisional fellowship program who have not already completed module 11 must complete module 11 under previous regulations during ATY3 or provisional fellowship training (PFT).</i></p> | <ul style="list-style-type: none"> <li>• No scholar role activities to complete if previously completed module 11.</li> <li>• Or must complete module 11 if not previously completed.</li> </ul> | <p>N/A</p>            |

## Module 12

Module 12, which encompasses professional practice, is incorporated into the ANZCA Roles in Practice, ANZCA Clinical Fundamentals and other related activities in the revised curriculum. Accordingly, there are no specialised study unit equivalents to this module within the revised curriculum and no transition requirements relating to the completion of this module.

## Examinations

Trainees who have completed the primary examination under the 2004 curriculum are exempt the requirement to complete the primary examination under the 2013 curriculum. This exemption takes effect upon entering basic training and is only available until the completion of the 2019 hospital employment year. Trainees in introductory training should note that the completion of the primary examination does not provide exemption from the initial assessment of anaesthetic competence (IAAC).

Advanced trainees should note there are no changes to the syllabus for the final examination under the revised curriculum and therefore no transitional arrangements are required. Trainees transitioning to advanced training at the start of the 2013 hospital employment year, and who have completed the final examination under the 2004 curriculum, are exempt the requirement to complete the final examination under the revised curriculum. All advanced trainees who have not passed the final exam at the commencement of the 2013 hospital employment year must complete the final examination under the revised curriculum.

The revised curriculum establishes limits in respect of the number of examination attempts permitted. In summary, trainees are permitted five (5) attempts at the primary examination and seven (7) attempts at the final examination before they become ineligible to re-sit these examinations and remain in the ANZCA vocational training program. For transitional purposes, the accumulated number of attempts at both the primary and final examinations prior to the start of the 2013 hospital employment year does not count towards the application of these limits under the revised curriculum.



### Primary examination

Transitional arrangements exist for trainees transitioning into basic training and carrying a partial pass from an earlier sitting of the primary exam. These trainees may sit the remaining part of the primary under the current regulations during 2012 or at the first sitting in 2013.

The first sitting in 2013 is the last opportunity to pass the remaining component of the current primary exam and this is only available to trainees with a partial pass. Trainees who have previously attempted the primary exam but failed both sections are not eligible for this sitting. If a trainee is unsuccessful at completing an outstanding part of the current primary exam at the first sitting in 2013, they are required to sit the new primary exam under the revised curriculum and no longer carry any credit from the previous partial pass.

The above information is summarised in the following table.

| Examination  | 2012                        |  | 2013   |                              | 2014                        |                              |
|--|-----------------------------|--|--|------------------------------|-----------------------------|------------------------------|
|  | Eligible for first sitting? | Eligible for second sitting?   | Eligible for first sitting?  | Eligible for second sitting? | Eligible for first sitting? | Eligible for second sitting? |
| <b>Current primary</b><br><br>(as per the 2004 curriculum) | Yes                         | Yes, this is the last chance to complete both parts of the current primary | Yes, however only for candidates carrying a partial pass. This is the last chance to complete any outstanding parts of the current primary.  | No                           | No                          | No                           |
| <b>New primary</b><br><br>(as per the 2013 curriculum)     | No                          | No   | Yes, however, only for BTY1 candidates who have completed between 13 and 26 weeks of training and achieved initial assessment of anaesthetic competence and BTY2 candidates with sufficient clinical anaesthesia time. | Yes                          | Yes                         | Yes                          |

For those attempting the primary examination for the first time in 2013 or those who have not passed either part of the current primary examination, the new primary exam is available (to eligible candidates) from the first sitting in 2013.

Eligible candidates for the first sitting of the new primary exam in 2013 comprise:

- BTY1 trainees who (1) have completed between 13 and 26 weeks of training and (2) have completed their initial assessment of anaesthetic competence (IAAC). Candidates must be trainees who have completed all requirements for introductory training and commenced *basic training* at the time of sitting for the written part of the primary examination.
- Trainees at the BTY2 stage of training who have accumulated at least 26 weeks of clinical anaesthesia time (including normal leave).

For more information on the primary examination, please refer to [regulations 37.7.3.1, 37.9.2.11 and 37.9.3.10](#). Associate Professor Ross MacPherson's article in the June 2012 issue of the *ANZCA Bulletin* provides additional information on the primary exam; this is available at <http://www.anzca.edu.au/communications/anzca-bulletin>.

## Courses

If a trainee has completed less than 52 weeks of advanced training at the start of the 2013 hospital employment year and has not completed an EMAC course, they are required to do so. In addition, they must complete EMST if they do not meet the volume of practice (VOP) requirements for the resuscitation, trauma and crisis management clinical fundamental.

If a trainee has completed at least 52 weeks of advanced training at the start of the 2013 hospital employment year, they may elect to complete either EMAC or EMST.

If a trainee is in introductory training at the start of the 2013 hospital employment year, they are required to have completed an advanced life support course within 52 weeks prior to the completion of that core study unit. Similarly, an advanced life support course, or equivalent, is required prior to completing the basic training and advanced training core study units.

## ATY2 trainees

Trainees in ATY2 at the start of the 2013 hospital employment year, who at that date have not completed the final examination under the previous regulations and who under those regulations will complete 52 weeks (full-time equivalent) in ATY2 by October 31, 2013, will remain in ATY2 at the time of transition and will be permitted to complete all training requirements under previous regulations, provided all requirements are completed no later than the end of the 2015 hospital employment year. ATY2 trainees who meet these requirements will be notified individually by the College.

Trainees who are transitioning from ATY2 at the start of the 2013 hospital employment year and who have already completed the final examination will transition to advanced training in the revised curriculum and complete all residual training requirements under regulation 37. Similarly, trainees transitioning from ATY2 at the start of the 2013 hospital employment year who have not completed the final examination under previous regulations and who will complete 104 weeks (full-time equivalent) in advanced training

on or after November 1, 2013 will transition to the revised curriculum and complete the final examination and all other training requirements under regulation 37.

#### Volume of practice for cases and procedures

Following the introduction of the revised curriculum, there may be some trainees in their second year of advanced training who, although completing all the time-based and other requirements of advanced training after the date of the second final examination in 2013, will have a deficit in required volume of practice for cases and procedures in a sub-specialty area or areas for clinical fundamentals or specialised study units.

Trainees transitioning from ATY2 into advanced training at the start of the 2013 hospital employment year are strongly encouraged to take every opportunity to make up any volume of practice deficits in specialised study units and clinical fundamentals in sub-specialty areas (such as obstetrics).

As an exception to regulation 37 under 37.19.2, the ANZCA Council has resolved that, where these trainees have had no reasonable opportunity to make up this deficit in volume of practice without spending extended time in advanced training, they may proceed to provisional fellowship training and will not be required to make up the deficit in volume of practice.

#### ATY3 and provisional fellowship program (PFP) trainees

Under the transition arrangements, trainees in ATY3, ATY3E or the provisional fellowship program at the commencement of the 2013 hospital employment year complete all outstanding training requirements under the 2004 curriculum and have no additional requirements under the revised training program.

The regulations that govern the 2004 curriculum and training program take precedence for all trainees transitioning from ATY3 and provisional fellowship program. These include regulations governing limitations on normal leave and the amount of time spent in extended and interrupted training. Applications for fellowship can only be considered following the completion of all training requirements under the 2004 curriculum.

If, by the start of the 2013 hospital employment year, a trainee has partially completed ATY3 under the current regulations, they may elect either (1) to remain in ATY3 to complete their training or (2) apply to undertake a provisional fellowship program (PFP). Whether they complete their training as an ATY3 or provisional fellowship program trainee makes no difference to their transitional status, as they complete their training under the regulations relating to the 2004 curriculum.

If a trainee wishes to undertake the provisional fellowship program, they should note that these positions are subject to eligibility requirements and an approved application; application forms can be accessed via the ANZCA website. Provisional fellowship program appointments must be for a minimum period of 13 weeks (or full-time equivalent) inclusive of normal leave.

If a trainee has any modules to be completed during the 2013 hospital employment year, we recommend they contact their supervisor of training to determine the most appropriate ANZCA representative to review the completion of the relevant module.

Under the revised curriculum, [module supervisors](#) are replaced by specialised study unit supervisors, however, the ANZCA website retains a list of module supervisors who will continue to support trainees in completing their modules under the 2004 curriculum.

If a trainee has not yet received approval for their formal project, we encourage them to do so prior to the start of the 2013 hospital employment year. Under the revised curriculum, the role of the formal project officer is being replaced by a scholar role sub-committee and various departmental scholar role supervisors. As with module supervisors, the College retains a list of formal project officers who can assist you with the completion of your formal project.

If a trainee does not complete their training by the end of 2014 hospital employment year and fulfil all requirements for fellowship, their transition status is subject to review by the director of professional affairs (assessor). Accordingly, if a trainee or supervisor of training becomes aware of any factors that could inhibit the completion of training within the above timeframe, we recommend that they advise the director of professional affairs (assessor) via email for consideration as soon as possible.

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