

Recommendations for Curriculum Change

ANZCA Training Programme

Document Contents

This document contains the recommendations for change to the ANZCA Training Programme curriculum, formulated by the ANZCA Curriculum Review Working Group (CRWG), and approved by ANZCA Council, at the conclusion of the Curriculum Review Project. The CRWG propose that the following recommendations comprise the essential work and revisions required for the ANZCA Training Programme.

Unless otherwise noted, these recommended changes should be made for the initial implementation of the future ANZCA Training Programme. It is recognised that the implementation of all recommended changes within this document may *not* be feasible for the initial launch of the future training programme. Any changes not implemented initially should be developed and integrated into the programme in due course.

It is also recognised that some recommendations may relate to systems and/or processes that are currently in existence. In these cases the recommendation is included as information gathered during the Curriculum Review indicate that further work is warranted (for example, some existing systems/processes are not currently implemented in a standardised manner or may require refinement and/or redevelopment).

Key to Annotations

[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]

Indicates a recommendation that may not be required for initial implementation. If not implemented initially, the change should be developed and integrated into the programme in due course.

c.f.

Indicates a related recommendation that should be consulted or considered in parallel.



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DOCUMENT BACKGROUND

ANZCA CURRICULUM REVIEW PROJECT

The Australian and New Zealand College of Anaesthetists (ANZCA) is directly responsible for the examination and qualification of anaesthetists, and the standards of anaesthesia practice, in both Australia and New Zealand. As a major step in ensuring the ANZCA Training Programme remains contemporary, the ANZCA Curriculum Review Project was undertaken from August 2008 to May 2010.

Project Overview

A review of the current ANZCA Training Programme was planned since its introduction in 2004. The Curriculum Review Project was initiated in late 2008 to coincide with the first cohort of ANZCA Trainees completing the full programme.

The review was also undertaken in response to a number of issues facing the medical systems in which Fellows of the Australian and New Zealand College of Anaesthetists (FANZCAs) work and train:

- increased number of junior doctors seeking a place in vocational training from 2012, due to increased places offered by medical schools in both Australia and New Zealand;
- Government calls for expanded training settings (for example, into the private sector and rural areas);
- maintaining a contemporary training programme (both in clinical content and educational method).

The aim of the Curriculum Review Project was to enhance educational quality in three key areas of the ANZCA Training Programme:

- The teaching, learning and assessment methods used;
- The processes undertaken to manage and enhance the programme, including:
 - Continuous evaluation and quality improvement systems;
 - Development, training and support for ANZCA Teachers.
- The operational matters associated with the programme.

For full details of the ANZCA Curriculum Review Project, see: www.anzca.edu.au/edu/projects/curriculum-review

Consultative Phases

Submissions

The first consultative stage in the Curriculum Review Project was completed in January 2009 and took the form of an open submissions process. Any organisation/institution, group or individual having an interest in the ANZCA Training Programme was able to comment on the current training programme, indicate desired outcomes of training and also propose innovative ideas for the curriculum. Invitations were also sent to key stakeholders.

The submissions were open from 1 October 2008 to 31 January 2009.

For further details of the ANZCA Curriculum Review Submissions, see:

www.anzca.edu.au/edu/projects/curriculum-review/submissions

Survey

The second consultative phase in the Curriculum Review Project was completed in October 2009 and took the form of a survey of all ANZCA Fellows and Trainees. The survey focussed on the major issues surrounding the ANZCA Training Programme, as identified in the submissions process and/or by relevant College committees, working groups and operational units.

The survey was open from 21 September until 31 October 2009.

For further details of the ANZCA Curriculum Review Survey, see:

www.anzca.edu.au/edu/projects/curriculum-review/survey

Project Outcomes

The outcomes of the Curriculum Review Project include an ANZCA Curriculum Framework and a set of Recommendations for Curriculum Change.

ANZCA Curriculum Framework

A curriculum framework is an organised set of learning outcomes which define the scope of content to be learned and what needs to be taught and assessed. The ANZCA Curriculum Framework aims to explicitly define, all aspects of contemporary practice of Fellows of the Australian and New Zealand College of Anaesthetists (FANZCAs) and will be used to plan and deliver all aspects of the future ANZCA Training Programme (including its content, teaching, learning and assessment tools).

To develop this framework, the College adapted an internationally recognised and objectively researched framework used by many different medical specialties worldwide; the CanMEDS Curriculum Framework. The ANZCA CRWG coordinated the adaptation of this framework during the ANZCA Curriculum Review Project. During the review process consultation was sought regarding the ANZCA Curriculum Framework from all stakeholders, via an open submissions process, and from key stakeholders (i.e. ANZCA Fellows and Trainees), via a survey. Further amendments were also included following a review of other relevant curriculum frameworks, as well as input gathered from the ANZCA Trainee Committee and the ANZCA Regional/National Committees.

Recommendations

Information gathered during the Curriculum Review Project was also used by the Curriculum Review Working Group (CRWG) to develop a set of recommendations for changes to the ANZCA Training Programme.

Information Sources

Sources of information for development of the recommendations included:

- ANZCA Curriculum Review Submissions*;
- ANZCA Curriculum Review Survey*;
- Principles of the ANZCA Curriculum Review Working Group (CRWG);
- Outcomes from ANZCA CRWG workshops and meetings;
- Evidence-based (or best-practice) educational principles;
- College Strategy;
- Government requirements/requests;
- Medical Council (both Australian and New Zealand) requirements/requests.

* Where there was ambiguity between submission and survey data, the survey data was considered to take precedence, due to a larger sample size and that the survey was a focussed sample of the key stakeholders (i.e. ANZCA Fellows and Trainees).

Development Process

An initial draft of the recommendations for curriculum change was developed at the third workshop meeting of the ANZCA CRWG in November 2009. Along with members of the ANZCA CRWG, other relevant representatives were in attendance at this workshop to ensure the production of a comprehensive and coordinated draft set of recommendations.

Specifically, all members of the ANZCA Assessment Subcommittee (ASC) were invited to produce the first draft of recommendations regarding assessments, to ensure these recommendations were appropriately aligned with other aspects of the curriculum. The ASC membership also includes Chairs of other relevant committees (e.g. Workplace-based Assessment Subcommittee (WBASC), Primary Exam Subcommittee [PESC], Final Exam Subcommittee [FESC] and the Trainee Committee [TC]). In addition, the Chair of the ANZCA Clinical Teacher Development Working Group (CTDWG) and Coordinator of the Distance Education Working Group (DEWG) were also in attendance to ensure alignment of recommendations for teacher development and support activities, and production of e-Learning resources. Relevant College operational unit representatives were also in attendance to provide their perspectives (i.e. Training and Assessments, Finance, IT and Library).

Following this workshop, the ANZCA CRWG collated the proposed Recommendations and these underwent several rounds of feedback and amendments to produce the agreed set of recommendations. Approval for adoption of these recommendations was given by the ANZCA Education and Training Committee in March 2010, followed by ANZCA Council in April 2010.

RECOMMENDATIONS

CONTENT

General

1. That the ANZCA Training Programme should ensure trainees are prepared for the full scope of practice and responsibilities as Fellows of the Australian and New Zealand College of Anaesthetists (FANZCAs), including:
 - a) Anaesthesia for surgical and non-surgical procedures (including sedation and all forms of anaesthesia [i.e. topical, local, regional and general])
 - b) Perioperative/periprocedural care and management (including pre-, intra- and post-operative/procedural care and management)
 - c) Assessment and management of patients in the following conditions and/or situations¹:
 - i. Patients requiring analgesia
 - ii. Patients requiring critical/intensive care
 - iii. Patients in emergency and trauma situations (including those requiring resuscitation and life support)
2. That the ANZCA Training Programme should ensure trainees are prepared for the full scope of practice and responsibilities as FANZCAs, which include working:
 - a) as a specialist anaesthetist in a general hospital; and
 - b) in a full range of clinical settings (including, but not limited to: public and private hospitals; metropolitan, regional and rural settings; and non-hospital settings).
3. That efforts should be made to maintain and continually improve the practical/clinical relevance and clinical application of all aspects of the ANZCA Training Programme (including content, teaching, learning and assessment).

Topics²

4. That *all* Modules within the ANZCA Training Programme should be reviewed and revised to:
 - a) Ensure topics are updated to the contemporary practice of FANZCAs.
 - b) Reflect a commitment to practical/clinical relevance and clinical application.
 - c) Reflect required changes in themes for alignment with the ANZCA Curriculum Framework.
 - d) Reflect required changes to assessment (e.g. for alignment with the ANZCA Curriculum Framework).
5. That the ANZCA Training Programme should specify mandated topics and contexts (applicable to all trainees), but also require the completion of further training for consolidation of knowledge, skills and professional attitudes for transition to specialist practice.
 - a) That a certain degree of trainee choice in topics and clinical settings for the period of consolidated training would be acceptable.
 - i. This could include additional experience in sub-specialty areas or in specific clinical settings (such as rural and/or private practice).

¹ FANZCAs may be required to either manage these conditions and/or situations independently or support other specialists in these areas (e.g. Pain Medicine, Intensive Care Medicine and Emergency Medicine Specialists).

² The term 'topics' refers to areas of practice within the scope of practice for a Fellow of the Australian and New Zealand College of Anaesthetists (FANZCA). Topics are typically used as the basis of units of study within a curriculum (for instance, the 'Modules' within the current ANZCA Training Programme).

6. That the following topics are currently *under*-represented in the ANZCA Training Programme and should be included as appropriate within the future Training Programme (alphabetical order):
 - a) Airway Management;
 - b) Anaesthetic Machines and Equipment (including knowledge, use and safety);
 - c) Emergency and Trauma Management;
 - d) Perioperative Medicine;
 - e) Regional Anaesthesia (including ultrasound techniques).
7. That the following topic is currently *over*-represented in the ANZCA Training Programme and should be reviewed and amended accordingly within the future Training Programme:
 - a) Cardiac Anaesthesia
8. That the following topics need further investigation to determine whether their current representation within the ANZCA Training Programme is appropriate:
 - a) Intensive Care Medicine and Pain Medicine:
 - i. That further evaluation needs to be conducted, to determine a consensus on the amount of knowledge and clinical experience currently required in these topics, by a specialist anaesthetist working in a general hospital.
 - b) Cardiothoracic, Neuroanaesthesia, Paediatrics and Obstetrics:
 - i. That further evaluation needs to be conducted, to determine a consensus on the amount of clinical experience versus the skills acquisition required in these topics, for a specialist anaesthetist working in a general hospital.

Themes³

9. That the ANZCA Training Programme should include a balanced emphasis on all Roles within the ANZCA Curriculum Framework, with increased inclusion of and emphasis on Roles other than Medical Expert.

Learning Outcomes

10. That the ANZCA Curriculum Framework should be used to plan and deliver all aspects of the ANZCA Training Programme (including content, teaching, learning and assessment).

Clinical Experience / Volume of Practice (VOP)

11. That the clinical experience / volume of practice (VOP) requirements within the ANZCA Training Programme should be reviewed and revised, to:
 - a) Reflect the contemporary practice of FANZCAs.
 - b) Reflect changes in scope of practice for FANZCAs.
 - i. Including the consideration of changes in scope of practice within perioperative medicine, intensive care medicine and pain medicine.
12. That the clinical experience/VOP requirements be set separately for:
 - a) Each topic within the mandated training period; and
 - b) Each topic and/or setting within the consolidation of practice period.
13. That the clinical experience/VOP requirements are explicitly and appropriately defined for each topic and/or setting. Such definitions may include a combination of one or more of the following:
 - a) Required number of cases.
 - b) Required amount of procedural experience and/or competence.
 - c) Required clinical time or sessions.
14. That clinical experience/VOP requirements must be formally recorded as a requirement of training.
(*cf. Recommendation 26*)

³ The term 'themes' refers to the roles that a FANZCA fulfils in all areas of practice (i.e. the Roles specified within the ANZCA Curriculum Framework).

Assessment

General

15. That all learning outcomes (including knowledge, skills and professional attitudes) across the ANZCA Training Programme should be assessed.
 - a) That all ANZCA learning outcomes should be blue-printed to the ANZCA Curriculum Framework.
16. That assessments designed to be within the ANZCA Training Programme should *not* be used as a tool for selection into the Training Programme.
17. That all assessments within the ANZCA Training Programme should conform to the ANZCA Guidelines on Assessment (available from: www.anzca.edu.au/resources/guidelines/)
 - a) Including that efforts be made to ensure that all assessments:
 - i. be standardised;
 - ii. be criterion-referenced;
 - iii. have increased practical/clinical relevance and clinical application;
 - iv. have a positive impact on learning;
 - v. include increased feedback to trainees;
 - vi. have increased transparency (including transparency of costs);
 - vii. be feasible to implement;
 - viii. allow assessment outcomes to be entered online.
18. That ANZCA endorses the principle that all *knowledge-related* learning outcomes will be *primarily* assessed by the ANZCA examinations (i.e. Primary and Final Examinations).
19. That ANZCA endorses the principle that *skills* and *professional attitudes* (including clinical reasoning and clinical experience requirements) will be *primarily* assessed by Workplace-based Assessments (WBAs).

Exams

20. That the ANZCA Primary Exam be reviewed and revised to:
 - a) Embed the exam within the ANZCA Training Programme and ensure that it is integrated with other aspects of the curriculum relevant to basic training.
 - b) Ensure eligibility for the Primary Exam occurs only after entry to the training programme and after the acquisition of basic skills in anaesthesia.
 - c) Ensure that all aspects of the exam have practical/clinical relevance
 - d) Ensure that the content of the exam directly reflects the content of the ANZCA Training Programme
 - i. By including the *basic knowledge* required to undertake each of the Roles within the ANZCA Curriculum Framework.
 - ii. By including the *basic knowledge* of the anaesthetic sciences which underpin all mandated Topics within the ANZCA Training Programme.
21. That the ANZCA Final Exam be reviewed and revised to:
 - a) Embed the exam within the ANZCA Training Programme and ensure that it is integrated with other aspects of the curriculum relevant to advanced training.
 - b) Ensure that all aspects of the exam have practical/clinical relevance and/or clear clinical application.
 - c) Ensure that the content of the exam directly reflects the content of the ANZCA Training Programme
 - i. By including the *advanced knowledge* required for, and *application* of, each of the Roles within the ANZCA Curriculum Framework.
 - ii. By including the *advanced knowledge* and *application* of the anaesthetic sciences which underpin all mandated Topics within the ANZCA Training Programme.
22. That the purpose of the viva component of the ANZCA Exams (both Primary and Final) be reviewed in light of the introduction of WBAs
[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme].

Workplace-based Assessment (WBA)

23. That a suite of WBA tools be developed and included in a streamlined (and online) In-Training Assessment (ITA) process.
24. That the overall assessment load for ANZCA Trainees be reviewed and revised accordingly to ensure that the assessment load within the future ANZCA Training Programme is appropriate.
25. That the use of simulation be further investigated and integrated into the assessment regime for the ANZCA Training Programme, where and when appropriate.
(cf. Recommendation 45)
[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]

Clinical Experience / Volume of Practice (VOP)

26. That a formal process to record and review the clinical experience/VOP undertaken by each trainee be developed and implemented in the online environment.
(cf. Recommendation 14)

Beyond Level 1 Supervision

27. That the process for assessment to move beyond Level 1 Supervision is embedded within the ANZCA Training Programme.
 - a) By including this assessment as part of the assessment regime for an introductory module.

PROCESS

Programme Structure

28. That the ANZCA Training Programme will remain typically completed in five years of full-time training.
29. That the ANZCA Training Programme will specify mandated topics and contexts (applicable to all trainees), but also require the completion of further training for consolidation of practice.
 - a) The mandated section of the ANZCA Training Programme will typically be completed in four years of full-time training.
 - b) The consolidated practice component of the ANZCA Training Programme will typically be completed in one year of full-time training.
 - c) A certain degree of trainee choice in topics and contexts for the consolidated training period would be acceptable. This could include additional experience in sub-specialty areas or in alternative contexts (such as rural and/or private practice).

Progression

30. That the ANZCA Training Programme should have increased flexibility in the timing and order of Module completion. Including:
 - a) That modules may be completed in any order (apart from those modules deemed to require specific timing, such as an introductory module)
 - b) That Modules must allow for partial completion
 - i. This necessitates separate assessment of knowledge, skills, professional attitudes and clinical experience requirements.
31. That the ANZCA Training Programme will retain the separation between Basic and Advanced Training during the mandated training period.
 - a) That the separation between years within each of these levels (e.g. Basic Training, Year One [BTY1] versus Basic Training, Year Two [BTY2]) be reviewed and retained or removed as appropriate.
32. That the rules for progression between basic and advanced training years within the ANZCA Training Programme be reviewed and revised to:
 - a) Ensure the Primary Exam is completed during basic training and the Final Exam is completed during advanced training.
 - b) Ensure increased flexibility in the timing and order of module completion (to move away from reliance on specific topic [i.e. 'Module'] completion).

For example, progression from basic to advanced training could be achieved following completion of the Primary Exam (and any WBA specific to basic training) along with a specified proportion of the total clinical experience requirements and a specified proportion of the total WBA requirements.
33. That further work is conducted to determine the requirements and terminology for the consolidated practice period within the future ANZCA Training Programme.
34. That the four Levels of Supervision within the ANZCA Training Programme will be retained.
35. That further work be conducted to ensure the system to identify and manage trainees who are underperforming is effective, fair, robust, transparent and standardised; with the primary aim being remediation wherever possible.

[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]
36. That further work is conducted to ensure trainees gain sufficient clinical experience and exposure, in light of the expected increase in the number of vocational medical trainees from 2012 onwards.

[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]
37. That further work is conducted to review and revise Recognition of Prior Learning (RPL) rules within the ANZCA Training Programme.

[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]

Training Contexts

38. That further work is conducted to review and improve standardisation of training between accredited training sites.
[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]
39. That further work is conducted to investigate training possibilities in a full range of clinical settings, for example:
- a) Private Sector
 - b) Rural and/or Regional Settings
- [NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]*

Selection of ANZCA Trainees

40. That further work is conducted to evaluate the role of the College in the selection process for ANZCA Trainees, including review of opportunities for improvement to the process and development of suitable selection criteria and/or pre-requisites.
[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]

On-Going Programme Evaluation, Programme Improvement and Training Accreditation

41. That a centralised system of ongoing evaluation and improvement for the ANZCA Training Programme be developed and implemented, to:
- a) Ensure continued applicability of the ANZCA Curriculum Framework.
 - b) Ensure continued alignment of training with the ANZCA Curriculum Framework.
 - c) Ensure continued commitment to practical/clinical relevance and clinical application.
 - d) Ensure topics are updated to the contemporary practice of FANZCAs.
42. That further work is conducted to ensure ongoing alignment of training accreditation processes with the future ANZCA Training Programme.
[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]

RESOURCES

Teaching and Learning Resources

43. That ANZCA should increase its role as an education provider.
44. That ANZCA move toward being a source of educational resources that are suitable for ANZCA Training as outlined in the ANZCA Curriculum Framework.
 - a) That ANZCA develop and provide core educational resources for ANZCA Training, and that these resources should:
 - i. Be standardised
 - ii. Utilise technology (particularly that they be supplied in the online environment)
 - b) That ANZCA develop a system to endorse other external and/or existing educational resources relevant to ANZCA Training.

[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]
45. That the use of simulation be further investigated and integrated into the teaching and learning resources to support the ANZCA Training Programme, where and when appropriate.

(cf. Recommendation 25)
[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]

ANZCA Teacher Support and Development

46. That ANZCA should make efforts to improve efficiency of supervision for ANZCA Trainees
 - a) To increase supervision availability, particularly for an expected increase in the number of vocational medical trainees from 2012 onwards.

[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]
47. That the College should continue to develop and implement initiatives to increase and standardise the College's training, support and resources for ANZCA Teachers.
48. That the College should ensure that the training, support and resources for ANZCA Teachers are continually evaluated to ensure alignment with the ANZCA Training Programme.

[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]

Trainee Support and Guidance

49. That ANZCA should increase its role as a provider of trainee support and guidance.

[NB. Desirable, but not necessary for initial implementation of the future ANZCA Training Programme]