

11 January, 2017

Service pressures and the role of anaesthetists in training - Joint statement by the Royal College of Anaesthetists and the Association of Anaesthetists of Great Britain & Ireland

The Royal College of Anaesthetists (RCoA) and the Association of Anaesthetists of Great Britain & Ireland (AAGBI) are aware that some anaesthetists in training have been asked to work outside of their usual scope of practice due to recent unprecedented demands on clinical services. We have been in discussion with Health Education England to clarify the situation and agree an approach, and will continue to raise such issues at the highest levels.

Patient safety should be the first priority of all NHS staff at all times. To support the needs of patients, and their safety, we believe the following principles are important when redeployment of trainees in our specialty is being considered although some of the points made would be equally applicable to non-trainee colleagues:

- Trainee anaesthetists should be redeployed from their normal duties only in exceptional circumstances, and for the shortest possible length of time. The decision to do so should be made only by the Medical Director or deputy taking account of all service pressures and the clinical environment pertaining at that time.
- Trainee anaesthetists should never practice beyond their competence¹. Trainees working in unfamiliar environments must have clear lines of supervision and responsibility established, and they must always receive adequate induction and be familiar with local governance arrangements.
- It is important that those trainees asked to help support a part of the service under pressure are selected equitably from all of the medical staff competent to contribute to that aspect of the hospital's clinical activity and that the number of sessions each redeployed trainee spends in another clinical service is closely monitored.
- If as a result of a change in duties an anaesthetic trainee misses an important training opportunity, it should be clearly outlined how this training will be accessed in a timely manner once the crisis has passed. We would encourage trainees to reflect on their experiences of working under these circumstances with their educational supervisors so that trainers can fully understand the problems trainees face and the potential for learning in these unfamiliar environments.

The decision to alter a trainee anaesthetist's duties should be communicated by the Medical Director to the local Guardian of safe working, the trainee's educational supervisor, RCoA Tutor (who should inform the relevant RCoA Regional Advisor) and Postgraduate Dean at the earliest opportunity. This should outline the circumstances that led to the redeployment being necessary; how long it will last for and the actions that will be put in place to avoid a recurrence in the future.

We urge all relevant bodies to work with us to look for long-term solutions to the problems facing the NHS and call for the necessary investment to support over-stretched front line services.

Dr Liam Brennan, President, Royal College of Anaesthetists

Dr Paul Clyburn, President, the Association of Anaesthetists of Great Britain & Ireland

Reference:

1. Good Medical Practice GMC, 2013 http://www.gmc-uk.org/Good_medical_practice_English_1215.pdf_51527435.pdf

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