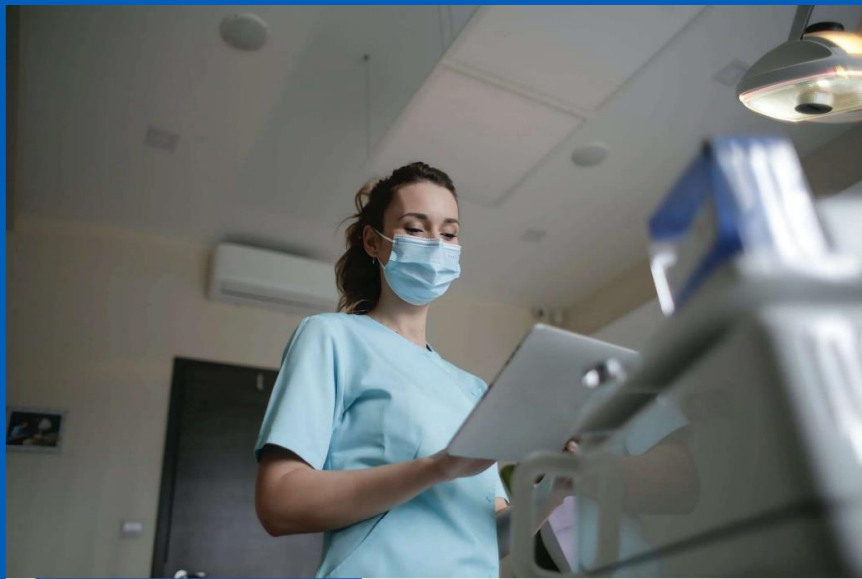


Trainee bulletin

School of Anaesthetics

March 2025



Hello and welcome

In this bulletin, you will find updates on:

- [Introduction](#)
- [HoS DHoS Updates](#)
- [School Resources](#)
- [ARCP Preparation](#)
- [TPD Update](#)
- [Sleep Advice](#)
- [Regional Training Days](#)
- [HET Updates](#)
- [Events](#)

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- [PLAN Update](#)



Introduction

Dear colleagues,

A belated bulletin having skipped the February edition.

This one is a bit longer with a bit more content - sorry for the long read!

Do take note of the PLAN update, LTFT and ARCP reminders

A very warm welcome to the London School of Anaesthesia for those residents who have joined us in February. Congratulations in joining not only best medical specialty but also the best region to train in!!

This is the March edition of a monthly newsletter containing useful information and updates.

HoS and DHoS Updates

London School of Anaesthesia
Head of School – Dr Aasifa Tredray
Deputy Head of School – Adreienne Stewart & Carlos Kidel

London Anaesthesia Training Committees (STC)

North London Anaesthetic Programme			South London Anaesthetic Programme	
North West TPDs	North Central TPDs	North East TPDs	South East TPDs	South West TPDs
Ruth Bedson (S1) Atika Sabharwal (S2) Amardeep Riyat (S3)	Abigail Whiteman (S1) Kate Sherratt (S2) Trudi Young (S3)	Naomi Hancox (S1) Stephan Hallworth (S2, S3)	Marina Choudhury (S1) Dev Mahtani (S2, S3)	Adam Shonfeld (S1) Daniela Mathew (S2) Anna Walton (S3)
Regional Advisor Sian Jaggar	Regional Advisor Sonia Brocklesby	Regional Advisor Roger Cordery	Regional Advisor Oliver Rose	Regional Advisor Rene Suite

Commented [MA1]: This should read as DHoS

Pan London and KSS Advanced Pain Training – London and KSS Pain Training Advisory Group (LKPTAG) Pain Training Programme Director – Fauzia Hasnie Faculty of Pain Medicine Regional Advisors – North London Ashish Shetty, South London – and KSS Sandesha Kothari	
Pan London Anaesthetics Educational Delivery TPDs – Gunjeet Dua, Emilie Hoogenboom	
Pan London Anaesthetic Simulation Leads – Janis Ferns, Ching Pang	
Pan London Anaesthetics Academic Training Programme Director – Gudrun Kunst	
Pan London Anaesthetic Less Than Full Time Training Advisor and SRTT Champion – Anna Fowler	
School Trainee Reps and NHS England Education Fellows	
Pan London NHS England Funded Anaesthesia Associate Training Programme – AA Training Lead – Dan Heaton, Ambassador Frances Marfleet	
<u>Anaesthetics Health Education Team</u> Service Delivery Manager (SDM) – Jemma Thompson, Operations Manager (OM) – Maureen Austin ICM and KSS Officer – Deborah Bunce Email: england.anaes.lase@nhs.net (trainer enquiries) PSP Link: https://lasepgmdsupport.hee.nhs.uk/support/home	
<u>North London Anaesthetic Programme</u> North London Officer – Rukayat Muhammed Administrators – Ben Owusu-Ansah (NE & NW) Mubeen Akhtar (NC)	<u>South London Anaesthetic Programme</u> South London and Pain Officer – Claire Bowden South London Administrator – Mohammed Rayhan

TPD Update

Stage 3 NW London TPD Update

Dear residents,

It's been a busy 2025 so far with a lot of activity for stage 3 in NW London. I'd like to highlight the following:

- We had successful January 2025 ARCPs with outcomes 6s for these trainees:
 - Dr Sekina Bekare (dual anaes/ICM)
 - Dr Abigail Dias (dual anaes/ICM)
 - Dr Victoria Laxton
 - Dr Dipal Shah
 - Dr Asako Shida
 - Dr Edward Watson (dual anaes/ICM)
- Wishing you all a successful consultant career, of which I have no doubts!

- Thanks to all the colleagues, particularly ESs and CTs, for their support in preparing for the panels.

-I'd like to highlight some important feedback from the panels:

- A number of trainees had stage 3 HALOs closed relatively early in their training, so another reminder to please keep these open until the end of the program. I've published previous comms relating to this so please ensure you are familiar with the college curriculum assessment guidance.

- It was also evident that there is some confusion regarding SIA distribution. The college have recently published guidance on this ([hyperlink here](#), see below). Essentially all trainees need 12 months WTE of SIA, which can be composed of the combined total of the minimum college accepted WTE duration for each SIA. They will not accept more than 12 months WTE SIA for CCT.

Pain HALO Approval:

Regarding status of the assessor completing stage 2 and 3 pain HALOs, recent input from our pain faculty now state that this is to be completed by either the pain faculty tutor, pain regional advisor or pain TPD only, not your ES (stage 1 can be approved by educational supervisors).

Stage 3 Induction:

-I will be delivering a virtual induction to new ST6 trainees (and those ST5s post-FRCA who are due to commence stage 3) on Tuesday 25th March, 15:30 - 17:00.

- Areas covered will include:

- Stage 3 curriculum overview
- Planning their stage 3 training in NW London
- SIAs
- Approaching CCT
- Q&As

- Whilst non-compulsory, I hope this will inform you of stage 3 requirements/expectations and provide an opportunity to answer your questions.

- This is also open to ES and CTs so please colleagues please come along and join the fun.

- Anyone interested needs to email me (amardeepsingh.riyat@nhs.net) directly to register.

<https://rcoa.ac.uk/documents/2021-curriculum-learning-syllabus-stage-3-special-interest-areas/introduction>

Dr Amardeep Riyat, stage 3 TPD, NW London

Sleep Advice

Good Sleep for Shift Work

Staff Psychological & Welfare Service

Written by Dr Sara McNeillis and Dr Hugh Selsick. Edited by Emma Grindrod and Alencia Trim.

Sleep is governed by two processes. One is our **internal body clock**, and the other is **sleep pressure**, which is proportional to the number of hours we are awake.

Shift-work often disrupts both processes. The following guide will help you maximise your ability to sleep whilst juggling shift work.

In the red

We all build up a sleep debt on any day where we shorten or reduce the amount of sleep we have, compared with the amount we need. Often, we try to repay this by sleeping extra hours (commonly “lie-in”) at the weekends.

While we all carry over some sleep debt, we can clear it. But we can’t “bank” extra sleep hours, i.e. we can’t add sleep hours to add “sleep credits”. Once the sleep debt has been cleared we do not benefit from additional sleep.

A few things to remember

Our circadian rhythm informs us when we are hungry and when we should sleep. It ensures we are sleepy between 2am and 4am in the night and tired between 1pm to 4pm in the afternoon.

Our **circadian rhythm is kept in time by light and melatonin release**. Light is a dominant cue and can change our circadian rhythm profoundly if used at the appropriate time.

Light can have a maximum effect in the morning and late evening.

Sleep onset is also best when the body temperature is falling rather than rising. Our circadian rhythm governs when our core body temperature rises and falls. It is difficult to change this, however if you are too warm when sleeping there is a possibility of reducing REM or dream state sleep.

Commented [M2]: Ideally if you can add a core body temperature graph as an example.



Before a night

Having a normal day, i.e. not sleeping during the day before a night shift causes an increase in the risk of accidents.

You can minimise this risk by increasing your sleep time in the days leading up to a night shift so that you are not starting with a heavy sleep debt.

During the day:

- Try to have a “lie-in” in the morning
- Use eye-masks and light-reducing blinds to limit light input in the morning
- Try to nap after lunch
- It is important to eat a balanced diet. Regular mealtimes should be maintained. Eat breakfast in the morning lunch around midday and dinner in the evening. Do not have a large meal before or during the night shift.
- A light meal with less starch-based carbohydrate may help you to maintain wakefulness during the night shift.
- Aim to have a walk outside and get some evening light to delay your sleep onset.



shift

During a night shift

It is important to realise that your circadian rhythm will continue for a few days despite change in sleep schedule. You may feel sleepy in the later half of the night shift.

- Try to take breaks and naps during the shift, if you can.
- Caffeine containing drinks may boost alertness by counteracting the sleep pressure. Aim to have a caffeine drink timed 3hrs before your maximum sleepy period. Often this is around 3-4am
- Bright light (10000 lux) can improve wakefulness you may use this for 15 mins every hour during the night shift.

After a night shift

You may feel extremely sleepy or extremely awake.

- **Aim to get 4 hours sleep in the day after a night shift so that you clear some sleep debt but not all.**

You may need to travel home and be alert. So, if *extremely sleepy*:

- Have caffeine intake for the journey home
- On the way home, wear dark glasses to prevent light entrainment
- Ensure the bedroom is well-ventilated and dark
- Put your phone on silent
- Aim to have 7-8 hours of sleep try to sleep in the afternoon- early evening
- On awaking, have a meal and get some evening light to delay the sleep onset for the next night shift.

Similarly, alertness promoting neurotransmitters may override the sleep onset. It is important to reduce these by using relaxation techniques.

If you're *extremely awake*:

- Wear dark glasses after work to minimise light entrainment
- Eat a meal containing starch based carbohydrate
- Avoid caffeine intake 3 hours before planned bedtime
- You may find exercise immediately after a night shift helpful to increase the depth of sleep

Return to normal days

It is important to maintain a steady relationship to sleep debt to help return to normal night time sleep.

- Take a caffeine containing drink at 2pm to reduce the sleep pressure for the early evening
- Exercise in the afternoon
- Wear sunglasses in the early evening to minimise light entrainment
- Have a meal with some starch-based carbohydrate in the evening
-

SHIFT WORK SLEEP DISORDER

This disorder occurs in up to 26% of shift workers. It may be associated with adverse health and can be treated. It is important to recognise the condition and seek help via referral to a sleep specialist.

Shift work sleep disorder occurs despite a good opportunity to sleep and can result in either excessive sleepiness in the night shift or insomnia following a night shift.

Commented [M3]: WE would prefer a referral to the sleep clinic for confirmation of diagnosis and treatment.

Commented [GE4]: Advice needed on what to do about this – change jobs? Talk to manager about making night shifts more spread out? Whats some additional ways of dealing with this?



School Resources

HEE London School of Anaesthesia website

The London school of Anaesthesia website with links to key information, training days & ARCP information can be found here:

<https://london.hee.nhs.uk/specialty-schools/anaesthesia>

London and South East Support Portal

<https://lasepgmdesupport.hee.nhs.uk/support/home>

For curriculum, LLP, and Exam information

<https://www.rcoa.ac.uk/>

If you have any queries where the answer isn't on either the school website, LASE support portal or RCOA website, and your ES and College Tutor can't help you, please raise a ticket through the support portal and/or contact the TPD for your stage of training. We now have a named TPD for each stage of training for each rotation within the 2 programmes.

PSP link: <https://lasepgmdesupport.hee.nhs.uk/support/home> (trainee enquiries)

HET updates

ARCP Preparation

This bulletin has an early reminder for those who have an ARCP in late spring / early summer

If you had an ARCP last spring / summer then you should expect one this spring / summer

The School website <https://london.hee.nhs.uk/information-anaesthetists-training> has information for ARCP preparation under the 'Information for Anaesthetists in Training' section

Even though these ARCP is some time away, it is really important to plan early because some components such as MTRs and MSF can take longer than expected to complete. It's also worth keeping mind that your ES might be on leave at some point in the run up to your ARCP.

Please ensure the NHSE team have a valid e-mail address for you - can update it by sending an email to england.anaes.lase@nhs.net

Some things to keep in mind are:

Arrange to meet with your ES in advance to prepare the Educational Supervisors Summary Report (ESSR). Complete your FORM R (part B) and link this to your ESSR prior to ES sign off.

ESSR - Please submit one ESSR for your ARCP for the full period under review where the start date is the day following on from the end date set for your previous ARCP.

Form R - The Form R must cover the entire period from the date of your last Form R to this one. You must include all periods of time out of training in your TOOT declaration. This includes OOPC, OOPE, OOPR (if not being counted for training and maternity/paternity leave.

The key to all this is early planning and preparation!

Do contact your Educational Supervisor or College Tutor for further guidance or support.

LTFT

Both college tutors and TPDs have raised concerns regarding the increasing number of applications for flexible training (LTFT) and time out of programme (OOP) through-out the year. This is making rotation grid management highly complex, leading to multiple gaps across training rotations at all times of the year. These gaps are beginning to impact department rota management and, in some cases, are affecting patient care, particularly out of hours.

Following discussions at our School Board meeting on the 14th of March, we would like to remind all residents of the required process for all London LTFT and OOP applications. Please follow this process carefully to ensure we can continue to support and approve all of your requests.

LTFT Applications

- Parental care
- Disability or ill health
- Caring responsibilities

These can be applied for with a start date at any time throughout the training year. A **16-week notice period** is required, less will only be considered in exceptional circumstances.

For all other LTFT applications and for ALL OOP applications

Only 4 application windows apply, with start dates aligning with the 4 school rotation months: February, May, August, and November.

Only in **exceptional circumstances** (e.g., emergency OOPC) will applications be considered outside of these start dates/windows.

Any requests to change a WTE (**increase, decrease, return to full time**) must also be made during one of the 4 windows.

For LTFT applications falling within the following categories:

- Welfare and wellbeing
- Unique opportunities
- Religious commitment
- Non-medical development
- Flexibility for training and career development

There are 2 LTFT Application windows left for this year:

- August start: 19/03/25 – 02/04/25
- November start: 17/06/25 – 07/07/25

For **all** OOP applications, only one window remains for this year:

- November start: 13/04/25 – 27/04/25

If a resident applies well in advance of the intended OOP start date. Their application will be added to next window.

If a trainee wants to apply for an OOP, but the job advertisement or interview falls within the 6 months' notice period, the trainee should discuss this with their TPD and apply for the OOP in advance to meet the NHSE notice period. The panel can approve the OOP application, noting that this is pending successful outcome at interview. **Start dates must still align with one of our 4 rotation months.**

Please ensure you submit applications within these windows to facilitate smooth processing and avoid disruption to training placements. If you have any questions, please reach out to your TPD.

Refer to the [OOP application form and the OOP windows for 2024](#).

The Postgraduate Dean remains the Responsible Officer for Doctors in training on OOP and they will still require an annual ARCP. You should also ensure you are fully understanding of any impact OOP may have on your visa status, statutory rights, continuation of service and pension. The [FAQ section](#) on the PGMDE Support Portal can help with queries related to this.

Events

Understanding and Addressing Burnout Workshop Series (A series of free and confidential online PSU workshops focusing on burnout) *****SPACES NOW AVAILABLE*****

Unrealistic workloads, unrelenting workplace pressures, inadequate access to timely support and problematic workplace cultures are significant contributing factors for burnout nevertheless healthcare practitioners are often left to feel that it is a personal failure or lacking that results in their symptoms of burnout. Many don't recognise the features at all until it has significant impact on their health, relationships, sense of self and livelihood.

In this series of short 3-hour workshops we hope to create an informal and confidential space for participants to pause and think about features of burnout and how they may address them.

This workshop will introduce you to the beginnings of a CBT informed approach to spotting and addressing burnout. We will invite you to consider what is within your

control to change or influence. This will include thinking about some deeply held beliefs (such as Imposter Phenomenon), expectations or perfectionist tendencies, anxieties about risk and negative cognitive distortions impacting your approach to work and wider boundaries.

Both evening and Saturday workshop options are being offered for flexibility.

Who are the workshops for?

Doctors, dentists and other healthcare professionals in training in London and KSS or others who are eligible for accessing the PSU.

Delivery format & what to expect:

- Online via zoom lasting 3 hours. Please ensure you have a working camera and audio to attend.
- Each workshop is part of a series but can be attended as a standalone session.
- The sessions are informal and confidential spaces where we will use small and large group discussions and educational material to think about burnout.
- Participants will be introduced to a CBT-informed approach for thinking about contributing factors for burnout and how to address them.
- Pre-course information will be sent out prior, and handouts will be sent to attendees after the sessions. Attendance certificates will be available afterwards. • Session information for each workshop is outlined below

Facilitator information: The sessions are facilitated by Dr Lisa Tyrer, a former GP and a current CBT psychotherapist. Lisa combines her experience as a CBT therapist, her work with medical practitioners experiencing burnout and the relevant research to help participants deepen their insight and skills in addressing burnout.

How to book your place: Spaces are limited so please only book a slot if you can attend the full session. You will need to book for each session individually and will be sent the zoom link in advance of each workshop.

You can book your place via the PSU Workshops page under the Performance & Wellbeing tab: <https://london.hee.nhs.uk/professional-development/psu-workshops-peer-support-information>

Professional Support Unit (PSU) for London and South East NHSE workforce, training & development Directorate

Session information:

Workshop 1- Understanding Burnout and How to Prevent it (3 hours) Tuesday 11th Feb 2025 - 5:30-8:30pm Wednesday 19th Feb 2025 - 9:00 -12:00pm Saturday 1st March - 9:00-12:00 pm Thursday 13th March - 5:30- 8:30pm In this session we will be looking at the ICD-11 definition of burnout and how it presents in medics. We will look at the first key contributor to burnout: energy depletion and exhaustion. We will discuss sleep, self-care, living in line with our values and setting and maintaining boundaries. We will also look at the effect of stress on performance and how you may try to work

differently. The aim of this workshop is to give you some tools to develop and maintain a safer work/life balance and protect yourself from burnout.

Workshop 3- Understanding Perfectionism and Burnout (3 Hours)

Friday 21st March 1:30-4:30pm

Tuesday 25th March 5:30-8:30pm

Saturday 29th March 9:00-12:00pm

Wednesday 2nd April 9:00-12:00pm

In this session we will look at the third key contributor to burnout: reduced professional efficacy and the relationship between perfectionism and feelings of not being good enough. We will look at the good and bad sides of perfectionism and tips on managing the negative consequences of perfectionist traits. The aim of this workshop is to give you a better understanding of how perfectionism impacts you and tools for reducing the negative effects including Imposter Phenomenon, anxiety about risk, and procrastination and avoidance.

Further inquiries: For any questions please email Enquiries.PSULondon@nhs.net

Plan Update

PLAN - new website and opportunities to get involved

PLAN, the Pan-London Perioperative Audit & Research Network, is a collaborative approach to delivering resident doctor-led audit and research across London. We aim to deliver largescale quality improvement and research projects, with opportunities for residents working in London to get involved.

We are pleased to announce the launch of our new website <https://sites.google.com/view/uk-plan/home>. Make sure to bookmark the page and keep an eye out for updates. You can also follow us on X (@PeriopResearch).

We have some exciting opportunities coming up that you can get involved with.

1. Applications for new trainee representatives in North East London

We are recruiting for two motivated and organised anaesthetic residents to join the committee as Regional Representatives for the North East London rotation. This is a fantastic opportunity for you to get involved in largescale regional research projects, contributing to project selection and development and help to run the network.

Responsibilities include:

- Promoting PLAN at a local level
- Providing a point of contact for residents in your region
- Support project leads to facilitate project implementation at a local level and troubleshoot local issues for project implementation
- Primary responsibility for recruitment of local consultant and trainee leads for PLAN-

adopted projects at all sites in your region

- Attend committee and project meetings

Please review the job description and selection criteria

<https://sites.google.com/view/uk-plan/home>

Applicants should email plan@uk-plan.net with:

- A brief 2-page CV
- A 250-word summary on why you would be keen to take on the role.

Deadline for applications is 1st April 2025.

Other regions will require new representatives soon – so please keep an eye out for further opportunities.

2. Network projects

We will be running two projects through the network this year:

- TXAIMS – a quality improvement project which aims to increase the use of tranexamic acid in major surgery. You can read more about this project [here](#).
- GLIMPSE – a service evaluation aiming to measure the prevalence of GLP1 and GIP RA use in the UK surgical population and estimating the incidence of complications related to their use during the perioperative period.

We will send details of how to get involved once these projects are ready to launch.

Residents can participate by collecting data for the project at your hospital or acting as a site lead. All participants will be listed as collaborators on published manuscripts and gain valuable experience of largescale anaesthetic research projects, which can be used towards sign-off for the “Safety & Quality Improvement” and “Research & Managing Data” HALOs.

3. Submit your idea to become the next PLAN project

Every year, we launch a competition to find the next PLAN project. This is open to all trainees across London and is an opportunity to utilise the power of our large, multicentre research network to realise the potential of your audit, QI or research project. This will be launched later this year. You can read more about how projects are selected [here](#).

4. Anaesthesia research fellow post, St Mary’s Hospital/ Imperial College London

Expressions of interest are invited for an anaesthesia research fellow post, to work within the Department of Anaesthetics at St Mary’s Hospital and MSK Laboratory at Imperial College London, to start from August 2025.

The post is for 1 year, with the option to extend, and is intended to provide the successful applicant with skills and training in basic science research, with support provided for doctoral applications for a career in academic anaesthesia. The post is aimed at post-FRCA residents with at least 4 years of anaesthetic experience, and offers 4 days per week of protected research time and a mix of clinical training and service in anaesthesia at St Mary’s Hospital.

To register your interest for the post or if you have any questions, please contact Dr Pav Sarai (Consultant Anaesthetist, pawandeep.sarai@nhs.net).

Mayur (PLAN Chair) - plan@uk-plan.net

If you have any questions or queries, please do get in touch with the HET team here at NHSE, either [via the PSP portal](#) or School line below.

Best wishes

Anaesthetics Specialty HET team & HoS Dr Aasifa Tredray

Healthcare Education Team, London and Kent, Surrey and Sussex

NHS England

KSS & LDN HEE Website: <https://kss.hee.nhs.uk/> <https://london.hee.nhs.uk/>

PGMDE support portal: <https://lasepgmdesupport.hee.nhs.uk/support/home>

School line: 0207 866 3237

HHS England is part of the NHS, and we work with partners to plan, recruit, educate and train the health workforce