

## **Overview**

There are not enough FICM specialist trainees to staff all units; shortages of resident staff occur in all sizes of unit however, smaller units suffer disproportionately from this. Training in ICM is valuable for many other doctors, at all stages, and it is feasible for all sizes of unit to tap into this resource.

Training provides a great way to keep your unit staff sharp and adds to the enjoyment of the job. Exposing trainees to ICM in your unit increases the chance of them returning as consultants, and it is vital that trainees are able to experience smaller remote and rural hospitals for future workforce planning.

## **Practical Steps**

- 1. Establish who will be the tutor for the department and ensure that there is enthusiastic support for training from all staff who will be involved. The administration of training demands that you are able to understand and complete paperwork promptly, and provide a great training ethos.
- 2. ST trainees: Contact the regional Training Programme Director (TPD) and place a marker that you would like to train should the opportunity arise. The latest FICM <u>'Guidance for Training Units in Intensive Care Medicine'</u> encourages Regional Advisors (RAs) and TPDs to place trainees in smaller units, perhaps for shorter durations. See if you can attend the regional Specialty Training Committee (STC) to get a feel of how the training is managed.
- **3.** Foundation trainees: Take foundation trainees onto your unit. They really enjoy the attachment, and a smaller unit is ideal at this level. They can provide far more help than you might think and are almost scarily enthusiastic. You will need to have a Foundation Educational Supervisor there will be a local contact to help with this. F2 trainees may get more out it than F1.
- 4. Medical trainees: Core trainees will shortly have to spend at least 10 weeks training in ICM. Contact your local Educational Supervisor in medicine and discuss how to implement this in your unit. Contact your local ICM TPD to tell them you want to keep these trainees locally for their ICM attachment.
- 5. Other specialties: Anaesthesia / Medicine / Emergency Medicine need ICM attachments. Often these are established in larger units but, over time there may be an opportunity for attachment to your unit. Establishing training for more junior trainees, such as F2, is a good preliminary step.