**2021 Curriculum Special Interest Areas - Wessex Plan**

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| **SIA & RC Indicative Time** | **Wessex**  **Time** | **UHS** | **PHU** | **UHD** | **Salisbury** | **Dorchester** | **HHFT** |

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| **Group 1** |  |  |  |  |  |  |  |
| **6-12m** |  |  |  |  |  |  |  |
| **Cardiac** | 12m |  |  |  |  |  |  |
| **Neuro** | 6m |  |  |  |  |  |  |
| **Obstetrics 1** | 6m |  |  |  |  |  |  |
| **Paeds** | 6-12m |  |  |  |  |  |  |
| **Pain 2** | 12m |  |  |  |  |  |  |

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| **Group 2** |  |  |  |  |  |  |  |
| **3-6m** |  |  |  |  |  |  |  |
| **Acute I/P Pain** | 3m solo  6m with RA |  |  |  |  |  |  |
| **Bariatric** | 3-6m |  |  |  |  |  |  |
| **Complex3**  **Orthopaedics** | 3-6m |  |  |  |  |  |  |
| **HPB 4** | 6m |  |  |  |  |  |  |
| **Major General 5** | 6m |  |  |  |  |  |  |
| **Ophthalmic** | 3m |  |  |  |  |  |  |
| **Airway** | 6m | Max 2 |  |  |  |  |  |
| **Plastics/burns** |  |  |  |  |  |  |  |
| **Resource Poor Env** | 3m | OOPT | | | | | |
| **Thoracic** | 6m | Max 2 |  |  |  |  |  |
| **Vascular 6** | 6m |  |  | Max 2 |  |  |  |
| **Military** | 3m | Incorporated in Training Already | | | | | |
| **POM 7** | 3-6m |  |  |  |  |  |  |
| **Regional 8** | 6m |  |  |  |  |  |  |
| **Transfer** | 3m | Need to be part of PHEM | | | | | |
| **Trauma** | 6m |  | | | Best as part of PHEM | | |
| **ICM** | 6m | or NICU |  |  |  |  |  |
| **GPCs 9** | 3m |  |  |  |  |  |  |

Green = complete SIA possible

orange = partial SIA possible

**Notes**:

1. Obstetrics - 2 x 3m block in 2 sites, ideally including UHS
2. Pain plan to be discussed with Regional Advisor for Pain and TPD
3. Weekly pelvis lists at UHS
4. Will need time in transplant centre
5. Consider combining with other SIA or POM. Max 2 at UHS across MG, POM, HPB.
6. Shorter duration if doing as ‘taster’ for general interest
7. Solo or combined with other SIA
8. Combined with Acute Pain
9. If wishing to count more than 3m as SIA then discuss with TPD. Need clear evidence of solid clinical progress to date and clear objectives for this SIA

The Wessex duration quoted is based on:

* Likely expectation of person spec. for job in that area (i.e. 6m cardiac is unlikely to get you a cardiac job post-CCT) - i.e career guidance
* Programme capacity and fairness for all
* Knowledge of historically how long it takes trainees to feel they ‘have got enough experience’.
* Flexibility for trainee in relation to their post-CCT objectives
* RCoA guidance stating that School can adapt to local requirements depending on local provision of training in the area.