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|  | |  | **European**  **Board of**  **Anaesthesiology** | |
| **Questionnaire for Trainees**  **Accreditation of Training in Anaesthesiology and Intensive Care** | | | | |
| To be completed by the trainees – The ESAIC guarantees strict confidentiality of all returned questionnaires | | | | |
| Please fill in all required fields (in blue) and send to [ataic@esaic.org](mailto:ataic@esaic.org) | | | | |
| Use the TAB-key to move forward to the next field – Shift-TAB to move backwards. | | | | |
| **1. BASIC DATA** | | | | |
| [Name of Hospital](file://SRVESABRU102/COMMON/ESA/Committees/ATAIC/Local%20Settings/Temporary%20Internet%20Files/Content.IE5/ONBV6GHT/Krankenhaus%20/%20Hôpital%20/%20Hospital) |  | | | |
| [Department](file://SRVESABRU102/COMMON/ESA/Committees/ATAIC/Local%20Settings/Temporary%20Internet%20Files/Content.IE5/ONBV6GHT/Abteilung%20/%20Département%20/%20Departamento) |  | | | |
| [City](file://SRVESABRU102/COMMON/ESA/Committees/ATAIC/Local%20Settings/Temporary%20Internet%20Files/Content.IE5/ONBV6GHT/Stadt%20/%20Ville%20/%20Ciudad) |  | | | |
| [Country](file://SRVESABRU102/COMMON/ESA/Committees/ATAIC/Local%20Settings/Temporary%20Internet%20Files/Content.IE5/ONBV6GHT/Land%20/%20Pays%20/%20Pais) |  | | | |
| Name of trainee |  | | | |
| Years of clinical training | 1  2  3  4  5  6  7 | | | |
| **2. QUESTIONS** | | | | |
| Does the training programme have an assigned Programme Director and/or Regional Adviser? | | | | yes  no |
| Do you have a personal tutor/mentor? | | | | yes  no |
| Do you have a written personalised teaching programme? | | | | yes  no |
| Did you have structured induction to both the department and hospital? | | | | yes  no |
| Is there a department library with current literature and Internet access? | | | | yes  no |
| Are there adequate rooms for reading? | | | | yes  no |
| Are there regular staff meetings where trainees attend? | | | | yes  no |
| Is there systematic registration of complications and incidents? | | | | yes  no |
| Are there critical incident conferences where trainees attend? | | | | yes  no |
| Do/did you get involved with research? | | | | yes  no |
| Do you keep a logbook? | | | | yes  no |
| Does the clinical caseload give adequate training opportunity? | | | | yes  no |
| Do you receive sufficient supervision by a specialist in your daily practice? | | | | yes  no |
| Is there a clear faculty commitment and positive attitude to theoretical and practical instruction? | | | | yes  no |
| Is the ratio of fully trained faculty to trainees sufficient? | | | | yes  no |
| Do you receive in-depth exposure to all core competencies? | | | | yes  no |
| Is there training exposure available in all agreed subspecialties? | | | | yes  no |
| Is sufficient time available for personal study and exam preparations (e.g. EDAIC)? | | | | yes  no |
| Is there opportunity/support for attending external educational courses and scientific meetings? | | | | yes  no |
| Does the department provide complete training to become a specialist? | | | | yes  no |
| Do working hours and/or rota planning have impact on training? | | | | yes  no |
| Is supervision available both in and out of hours? | | | | yes  no |
| Does service pressure have effect on training? | | | | yes  no |

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| **3. OPEN QUESTIONS** |
| How is the progress of your knowledge and skills in the speciality evaluated? |
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| Describe the strengths of the department. |
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| What improvements would you suggest for the department? |
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| What do you expect from a Hospital Visit by the ESAIC/UEMS? |
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| Are there specific areas you think the visitors should look into? |
|  |
| General comments |
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