Core Surgical Training in HETV

Mr James Gilbert
Consultant Transplant & Access Surgeon
Training Programme Director Core Surgery
The Programme

• 19 Rotations
• All themed
  • 5 T&O, 5 Gen Surg, 3 Urol, 3 Plastics, 2 H&N 1 CT
• 12 months in chosen specialty across 2 years
• First 6 months CT2 in specialty
• Same Trust / co-located Trusts for a year
• Additional flexible posts in Gen Surg, Paeds, T&O & OMFS
<table>
<thead>
<tr>
<th>Rotation</th>
<th>Theme</th>
<th>Duration - 6 months</th>
<th>Duration - 6 Months</th>
<th>Rotation Pairing</th>
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<tbody>
<tr>
<td></td>
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<td>Post</td>
<td>Hospital</td>
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<tr>
<td>HETV01</td>
<td>General Surgery - IST Pilot</td>
<td>Gen Surg (OXF)</td>
<td>Oxford University Hospitals (John Radcliffe Hospital)</td>
<td>Urology (OXF)</td>
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Modules

- Common Content Module
  - Everyone must complete this
  - Aligns to the MRCS

- Core Specialty Module
  - Select only the modules for specialties you rotate through

- ST3 Preparation Module
  - Undertaken in CT2 and only for your themed specialty

- Professional / Leadership Skills Module
  - Everyone must complete this
The Training Curriculum - ISCP

• Your Friend
• Has everything you need to know and do
• Fail safe place to store your work life
• Use contemporaneously not last minute
Welcome to version 1.0

START HERE
- Welcome to the ISCP site
- Help
- JCST
- Contact us

SURGICAL CURRICULUM
- Curriculum overview
- Syllabus
- Assessment and feedback
- Training System
- Teaching and learning

DENTAL CURRICULUM
- Curriculum and Syllabus
- Workplace Based Assessments

CLICK HERE TO FIND OUT MORE ABOUT THE NEW ISCP V10

Click here to LOG OUT
The syllabus

All published syllabuses have been approved by the General Medical Council (GMC)

Which syllabus should I choose?

- If you are a trainee in a generic or themed core programme (CT1-2):
  Click on the Core Surgical Training syllabus

- If you are a trainee in the early years of a run-through programme (ST1-2):
  Click on the relevant specialty syllabus and then on the Initial Stage of training.

  Run-through programmes include:
  - Cardiothoracic Surgery (in some programmes)
  - Neurosurgery

- If you are a trainee in Higher Specialty Training (ST3 or above):
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Each syllabus details the learning content and outcomes to be achieved at each stage of training.

<table>
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<td>Core Surgical Training</td>
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<td>Pre-2017 Core Surgical Training</td>
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<td>Neurosurgery</td>
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<td>Oral and Maxillofacial Surgery</td>
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Core Surgical Training (2017)

Background and rationale: modular structure

This curriculum describes Core Surgical Training in the UK. Arrangements in the Republic of Ireland differ, although some aspects are the same (e.g. the syllabus content for the MRCS examination). The overarching content of the Intercollegiate Surgical Curriculum Programme (ISCP) forms the basis for this curriculum but it has been updated and modified in parts to reflect aspects specific to Core Surgical Training.

The syllabus element of this curriculum, together with a brief explanation of its modular nature, has been inserted into each specialty curriculum.

BACKGROUND and RATIONALE

Core surgical training is diverse. Uncoupled from specialty training for the majority of trainees, the neurosurgical curriculum describes a run-through programme for all ST1 entrants and Cardiothoracic Surgery, Trauma and Orthopaedic Surgery (T&O) and Oral and Maxillofacial Surgery (OMFS) curricula are divided with both run-through and uncoupled programmes currently in operation. In addition, Academic Clinical Fellowships grant run-through status to successful applicants. While some Core Surgical Training programmes provide pre-agreed 2 year rotations themed to one of ten specialties, others are generic. In recognition of the time spent in dental surgery by its trainees, OMFS training omits the CT2 year. The required final competencies of successful trainees are also diverse with each specialty...
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Common content modules

Syllabus standards

Standards for depth of knowledge during early years surgical training

In the early years of training, the appropriate depth and level of knowledge required can be found in exemplar texts tabulated below. It is expected that trainees will gain knowledge from these or similar sources in the context of surgical practice defined in the core surgical curriculum. The curriculum requires a professional approach from surgical trainees who will be expected to have a deep understanding of the subjects, to the minimum standard laid out below. It is expected that trainees will read beyond the texts below and will be able to make critical use, where appropriate of original literature and peer scrutinised review articles in the related scientific and clinical literature such that they can aspire to an excellent standard in surgical practice. The texts are not recommended as the sole source within their subject matter and there are alternative textbooks and web information that may better suit an individual's learning needs. The numbers act as a key to knowledge sections of the various module of the syllabus. Some texts are more detailed than others and the more detailed works may be more appropriate to the ST3 preparation modules.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Possible textbooks or other educational sources</th>
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</table>
Physiology

Objective
To acquire and demonstrate a knowledge of the basic science which underpins the practice of surgery.

Knowledge (Core Surgery)

General physiological principles including:
- Thermoregulation
- Metabolic, ionic and acid/base homeostasis
- Cardiorespiratory homeostasis
- Haemostasis
- Acid base balance.

This will include the physiology of specific organ systems relevant to surgical care including the cardiovascular, respiratory, gastrointestinal, urinary, endocrine, musculoskeletal and neurological systems.
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<thead>
<tr>
<th>Competency</th>
<th>Form to use</th>
<th>Number required</th>
<th>Level of performance required</th>
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<tbody>
<tr>
<td>Take a tailored history and perform a relevant examination in an outpatient clinic</td>
<td>CEX (Clinic; history &amp; exam)</td>
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<tr>
<td>Take a tailored history and perform a relevant examination for an acutely unwell patient</td>
<td>CEX (A&amp;E/ward; history &amp; exam)</td>
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<tr>
<td>Effective hand washing, gloving and gowning</td>
<td>DOPS (Surgeon preparation)</td>
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<td>4</td>
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<tr>
<td>Accurate, effective and safe administration of local anaesthetic</td>
<td>DOPS (Administration of local anaesthetic)</td>
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<tr>
<td>Preparation and maintenance of an aseptic field</td>
<td>DOPS (Preparation of aseptic field)</td>
<td>3</td>
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<tr>
<td>Incision of skin and subcutaneous tissue</td>
<td>DOPS (Incision)</td>
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<td>3</td>
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<tr>
<td>Closure of skin and subcutaneous tissue</td>
<td>DOPS (Closure)</td>
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<td>3</td>
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<tr>
<td>Completion of WHO check list (time out and sign out)</td>
<td>DOPS (WHO checklist completion)</td>
<td>3</td>
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Requirements for sign off

1. Learning Agreements
2. WPBA’s – (Soon to include MCR’s)
3. Multi Source Feedback (MSF)
4. Topics
5. CV
6. Log Book
7. Audit
8. Other Evidence
MCR – Multiple Consultant Reports

• Will enable a holistic professional opinion of all trainers working with a trainee

• Will assess two broad areas:
  • GPC – Generic Professional Capabilities
  • CiP – Capabilities in Practice

• Consultant teams to do assessment corporately at two key points in a trainee rotation
Generic Professional Capabilities

- Developed by GMC & AoMRC
- 3 Inherent Domains
- 6 broad Capability domains
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Capabilities in Practice

Each CiP will require combinations of knowledge, clinical, professional and technical skills demonstrated for sign off.

- Assessed around Levels of Supervision
- Levels are:
  I. Able to observe only
  II. Able and trusted to act with direct supervision
      a. Supervision throughout
      b. Supervision for part
  III. Able and trusted to act with indirect supervision
  IV. Able and trusted to act at level of day 1 consultant
  V. Able and trusted to act at level beyond that of day 1 consultant
Assessment Framework
Assessment Framework

Placement

Learning agreement provides structure

Structured training

Objective Setting

Interim Meeting

Final Meeting

Position at end of last placement

Target

Placement

AES Report

MCR

ARCP

CEX

CBD

DOPS

PBA

MSF

CS Reports
Assessment Framework

Position at end of last placement

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ARCP

MCR

CS Reports

MSF

DOPS

CEX

CBD

Placement

Target

Objective Setting
2019 Outcomes

- 20 CT1 (1 ACF)
  - 15 outcome 1 at ARCP
  - 5 outcome 5 converted to an outcome 1

- 20 CT2 (2 ACF’s)
  - 16 outcome 6 at ARCP
  - 1 outcome 5 converted to a 6
  - 2 outcome 2 and 1 outcome 3

- 12 trainees secured ST3 NTN / ST3 ACF

- 3 trainees Trust grade ST3
2020 Outcomes

• 19 CT1 (1 ACF)
  • 17 outcome 1 at ARCP
  • 2 outcome 5 converted to an outcome 1

• 20 CT2 (1 ACF)
  • 14 outcome 6 at ARCP
  • 2 outcome 5 converted to a 6
  • 2 outcome 1 and 2 outcome 3

• 10 trainees secured ST3 NTN / ST3 ACF

• 8 trainees Trust grade ST3
Surgery is a great career and a lot of fun

James.gilbert@ouh.nhs.uk
Questions?