

Core surgical training competencies and ST3 entry 2010

This document outlines the common topics required of all surgical trainees to meet the **minimum eligibility requirements for ST3 programmes** across all surgical specialities in 2010. Examples of assessments and evidence are listed to support a satisfactory standard achieved by a trainee (referenced by learning agreements, trainee portfolios and ARCP reports) as follows:

Professional skills & behaviour	Examples of evidence or assessment tools*
1. Good Clinical Care	Mini-CEX
2. History taking	Direct observation by AES/CS report
3. Record keeping	Direct observation by AES/CS report; logbook
4. Communication with patients & their relatives	Direct observation by AES/CS report
5. Communication with colleagues within the hospital	Mini-PAT
6. Communication with colleagues in the wider healthcare context	Mini-PAT
7. Team working	Mini-PAT, Direct observation
8. Managing clinical care	Surgical DOPS, CbD
9. Health Advocate	Audit presentation; Observed teaching session
10. Scholar – clinical	Audit presentation
11. Scholar – education & teaching	Observed teaching session
12. Disciplined-based objectives	Mini-PAT, Direct observation by AES/CS, attendance records
13. Personal professional boundary objectives	Personal development plans and portfolio evidence
14. Ethics and professional bodies	Mini-PAT, CbD

Core surgical skills / knowledge	Examples of evidence or assessment tools*
1. Basic sciences	Completion of MRCS Parts 1 & 2/A
2. Basic Surgical Skills	Certificate of completion of Basic Surgical Skills course
3. The Assessment and Management of the Surgical Patient	CbD Mini-CEX
4. Perioperative Care	Mini-CEX Direct observation by AES
5. Assessment of multiple injured patients including children	Mini-CEX CbD
6. Bleeding diathesis	CbD; Audit presentation
7. Venous thrombosis + embolism	CbD; Surgical DOPS
8. Nutrition	Case study- Audit presentation
9. Academic activity	Audit presentation; Observed teaching session
10. Management of the dying patient	CbD Direct observation by AES
11. Endocrine and Metabolic Disorders	Mini-CEX
12. Child Protection	NHS Trust courses; Direct observation by AES

In addition to the above, the minimum syllabus topics required to be met satisfactorily for entry at ST3 level for **trauma and orthopaedic programmes** are:

Trauma & Orthopaedics	Examples of evidence or assessment tools*
Injuries	
Simple fractures and dislocations	CbD, Logbook, Surgical DOPS
Soft tissue injuries	Mini-CEX, CbD, Logbook, Surgical DOPS
Ankle fractures	Mini-CEX, CbD, Logbook, Surgical DOPS
Proximal femoral fractures in the elderly	CbD, Logbook, Surgical DOPS

*These are examples of evidence – proof of equivalent courses or self-directed learning should be provided where appropriate as part of portfolios. Schools of surgery and programme directors additionally provide specific information to support their programmes, expectations for learning agreements and assessments to feed into trainee learning and the ARCP process.

This guidance is applicable for current core-level trainees and to support ST3 entry in Spring/Summer 2010. An updated surgical curriculum has been developed and once approval from PMETB is gained, Schools of Surgery, Programme Directors and trainees will be informed and the ISCP & OCAP websites will be updated to reflect changes.

Key:

Mini-CEX	Mini Clinical Evaluation Exercise
AES	Assigned Educational Supervisor
CS	Clinical Supervisor
Mini-PAT	Peer Assessment Tool: 360 degree feedback
Surgical DOPS	Direct Observation of Procedural Skills in Surgery
CbD	Case based discussion

For further information on workplace based assessments, visit the ISCP website link: <http://www.iscp.ac.uk/Assessment/WBA/Intro.aspx>

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