

**SPECIALIST ADVISORY COMMITTEE FOR PAEDIATRIC SURGERY**

**CURRICULUM FOR OPERATIVE COMPETENCE ASSESSMENT**

**Trainee's Name** .....

**Deanery/Centre and Trainee's No:** .....

This Competence Assessment Curriculum for Paediatric Surgery is intended to provide a record of training to the achievement of independent technical competence over the breadth of Paediatric Surgery. For successive Consultant trainers, it provides a guide to progress during a trainee's rotation. The trainee can use the curriculum to focus on acquiring particular skills and experience. The forms should be updated as part of continual training evaluation and reviewed with the current trainer at the end of each limb of a rotation. The record should support the RITA process. Achievement of competence does not change the requirement for an appropriate volume of experience implied by indicative numbers.

Within the groups of procedures listed, to be deemed competent the trainee must have demonstrated appropriate surgical skills, but will not necessarily have performed every operation within the generic group. By the end of training, the trainee should be competent to operate independently on all areas in basic surgery (Group A), core paediatric surgery (Group B) and in those areas of expected subspecialisation (Groups C, D & E). **For guidance**, a trainee should have accomplished the capability of independent surgery at the following intervals: Group A – end of Year 2, Group B – end of Year 4, Group C or D – before application for CCST. Experience of (and perhaps competence in) Group C and/or D procedures may well be achieved before the final years. Most trainees will have experience of both of these groups, but must achieve competence in one. Competence in minimal access (Group E) procedures may be accumulated throughout training, mainly in the later years, in Centres offering this speciality. Diagnostic laparoscopy is required in the indicative numbers and all trainees should become fully competent.

Notes on filling in the Competence Assessment Forms

The trainer and trainee should agree the level of competence as one of the following:

S = requiring assistance/supervision by the Consultant

I = able to operate independently

Each entry should be initialled by the trainee (T) and by the Consultant trainer (C). The Consultant trainer's full name should be indicated at the foot of the page. When the trainee has achieved full competence of an independent operator for the Group concerned, the trainee and Programme Director should sign and date the form.

For Groups C, D & E, additional procedures may be listed in the blank spaces. These should indicate that the trainee has acquired a new range of skills beyond those required for the procedures listed. Examples would include spina bifida closure, partial hepatectomy, pulmonary surgery, complex laparoscopic procedures, insertion of artificial sphincter, excision of neuroblastoma, etc.

**Competence Assessment for Paediatric Surgery**  
**Group A Basic Procedures**

**Trainee's Name & No:** .....

Please indicate for each group of procedures the level of competence achieved each year. In the column S/I, indicate whether the trainee requires assistance/supervision by the Consultant (S) or is able to operate independently (I). Each entry should be initialled by the trainee (T) and the Consultant trainer (C). Please indicate the Consultant full name in the key. When the trainee has achieved competence as an independent operator for Group A, the form should be signed and dated by the trainee and Programme Director.

<b>Group A Basic Procedures</b>	<b>S/I</b>	<b>Year 1</b>	<b>S/I</b>	<b>Year 2</b>	<b>S/I</b>	<b>Year 3</b>	<b>S/I</b>	<b>Years 4/5/6</b>	<b>Comments</b>
Pyloromyotomy		T		T		T		T	
		C		C		C		C	
Appendicectomy		T		T		T		T	
		C		C		C		C	
Formation of enterostomy		T		T		T		T	
		C		C		C		C	
Open/Close laparotomy incision		T		T		T		T	
		C		C		C		C	
Orchidopexy		T		T		T		T	
		C		C		C		C	
Surgery of acute scrotum		T		T		T		T	
		C		C		C		C	
Circumcision		T		T		T		T	
		C		C		C		C	
Exc skin & subcutaneous lesions		T		T		T		T	
		C		C		C		C	

**Key**

<b>Consultant's Name</b>	<b>Initials</b>

Group A – Competence of Independent Operator	
Signed Trainee .....	Programme Director .....
Date .....	(Print Name) .....

**Competence Assessment for Paediatric Surgery**  
**Group B Core Procedures in Paediatric and Neonatal Surgery**

**Trainee's Name & No:**.....

This grouping of procedures is intended to ensure that the trainee is competent in the core procedures of Paediatric and Neonatal Surgery by the expected time of entry to the Intercollegiate Board Examination. Consultant trainers should be satisfied that the trainee has appropriate skills for all procedures related to each of the Groups listed, eg, competence as in independent operator for the correction of malrotation and for intestinal resection and anastomosis will imply that the trainee would be safe with duodenal atresia. Similarly, the trainee who is competent at formation of enterostomy (Group A) and at "laparotomy and proceed" is presumed competent to deal with the intra-abdominal complications of necrotising enterocolitis. When the trainee is competent as an independent operator, the trainee and Programme Director should sign and date the form.

<b>Group B Core Procedures</b>	<b>S/I</b>	<b>Years 1 / 2</b>	<b>S/I</b>	<b>Year 3</b>	<b>S/I</b>	<b>Year 4</b>	<b>S/I</b>	<b>Years 5/6</b>	<b>Comments</b>
Neonatal inguinal hernia		T		T		T		T	
		C		C		C		C	
Correction of Malrotation		T		T		T		T	
		C		C		C		C	
Intestinal resection and Anastomosis		T		T		T		T	
		C		C		C		C	
Laparotomy and proceed		T		T		T		T	
		C		C		C		C	
Upper GI endoscopy and Bronchoscopy		T		T		T		T	
		C		C		C		C	
Central venous access		T		T		T		T	
		C		C		C		C	
Exc thyroglossal/branchial Remnants, etc		T		T		T		T	
		C		C		C		C	
Fowler-Stephens' procedure		T		T		T		T	
		C		C		C		C	

**Key**

<b>Consultant's Name</b>	<b>Initials</b>

Group B – Competence of Independent Operator	
Signed Trainee .....	Programme Director .....
Date .....	(Print Name) .....

**Competence Assessment for Paediatric Surgery**  
**Group C Specialist Paediatric Surgery**

**Trainee's Name & No:**.....

Additional procedures may be listed in the blank spaces. These should indicate that the trainee has acquired a new range of skills beyond those required for the procedures listed (See note on cover sheet). When the trainee is competent as an independent operator, the trainee and Programme Director should sign and date the form.

<b>Group C Specialist Paediatric Surgery</b>	<b>S/I</b>	<b>Years 1/2/3</b>	<b>S/I</b>	<b>Year 4</b>	<b>S/I</b>	<b>Year 5</b>	<b>S/I</b>	<b>Year 6</b>	<b>Comments</b>
Oesophageal atresia & TOF		T		T		T		T	
		C		C		C		C	
Other thoracic lesions (H-TOF, diaphragmatic hernia, etc)		T		T		T		T	
		C		C		C		C	
Definitive surgery for Hirschsprung's disease		T		T		T		T	
		C		C		C		C	
Surgery for anorectal anomalies		T		T		T		T	
		C		C		C		C	
Fundoplication		T		T		T		T	
		C		C		C		C	
Wilms' nephrectomy		T		T		T		T	
		C		C		C		C	
		T		T		T		T	
		C		C		C		C	
		T		T		T		T	
		C		C		C		C	

**Key**

<b>Consultant's Name</b>	<b>Initials</b>

Group C – Competence of Independent Operator	
Signed Trainee .....	Programme Director .....
Date .....	(Print Name).....

**Competence Assessment for Paediatric Surgery**  
**Group D Specialist Paediatric Urology**

**Trainee's Name & No:**.....

Additional procedures may be listed in the blank spaces. These should indicate that the trainee has acquired a new range of skills beyond those required for the procedures listed (See note on cover sheet). When the trainee is competent as an independent operator, the trainee and Programme Director should sign and date the form.

<b>Group D Specialist Paediatric Urology</b>	<b>S/I</b>	<b>Years 1/2/3</b>	<b>S/I</b>	<b>Year 4</b>	<b>S/I</b>	<b>Year 5</b>	<b>S/I</b>	<b>Year 6</b>	<b>Comments</b>
Partial nephrectomy		T		T		T		T	
		C		C		C		C	
Pyeloplasty		T		T		T		T	
		C		C		C		C	
Ureteric reimplantation		T		T		T		T	
		C		C		C		C	
Endoscopic procedures		T		T		T		T	
		C		C		C		C	
Surgery for hypospadias		T		T		T		T	
		C		C		C		C	
		T		T		T		T	
		C		C		C		C	
		T		T		T		T	
		C		C		C		C	
		T		T		T		T	
		C		C		C		C	

**Key**

<b>Consultant's Name</b>	<b>Initials</b>

Group D – Competence of Independent Operator	
Signed Trainee .....	Programme Director .....
Date .....	(Print Name) .....

**Competence Assessment for Paediatric Surgery**  
**Group E Minimal Access Procedures**

**Trainee's Name & No:**.....

Additional procedures may be listed in the blank spaces. These should indicate that the trainee has acquired a new range of skills beyond those required for the procedures listed (See note on cover sheet). When the trainee is competent as an independent operator, the trainee and Programme Director should sign and date the form. Competence in diagnostic laparoscopy is a requirement for all trainees.

<b>Group E Minimal Access Procedures</b>	<b>S/I</b>	<b>Years 1/2/3</b>	<b>S/I</b>	<b>Year 4</b>	<b>S/I</b>	<b>Year 5</b>	<b>S/I</b>	<b>Year 6</b>	<b>Comments</b>
Diagnostic laparoscopy		T		T		T		T	
		C		C		C		C	
Laparoscopic appendicectomy		T		T		T		T	
		C		C		C		C	
Laparoscopic fundoplication		T		T		T		T	
		C		C		C		C	
Laparoscopic nephrectomy		T		T		T		T	
		C		C		C		C	
Diagnostic thoracoscopy		T		T		T		T	
		C		C		C		C	
		T		T		T		T	
		C		C		C		C	
		T		T		T		T	
		C		C		C		C	
		T		T		T		T	
		C		C		C		C	

**Key**

<b>Consultant's Name</b>	<b>Initials</b>

Group E – Competence of Independent Operator	
Signed Trainee .....	Programme Director .....
Date .....	(Print Name) .....