Standards for Training Urologists in Paediatric Urology.

The generic standards for the surgical training are defined in the document “JCST standards for Surgical Training”, which is available via the JCST website. This is an additional document which seeks to define the standards for the training of urologists in paediatric urology.

1. Curriculum
1.1 The curriculum for training in paediatric urology is defined in the Urology curriculum (available via ISCP [http://www.iscp.ac.uk/]). All trainees will be expected to be trained according to the generic component of the curriculum, while those with a particular interest in paediatric urology will be trained according to the modular component of the curriculum.
1.2 The modular component of the curriculum is part of the final section of the curriculum. As such, this training is usually undertaken in the final year of training.
1.3 In occasional circumstances, the modular training may be undertaken earlier in the curriculum, but will only be possible when the trainee has successfully completed the FRCS(Urol) examination
1.4 The requirements set out in the approved curriculum must be delivered and assessed
1.5 The approved assessment system must be fit for purpose and should be conducted according to the JCST Document “Standards for Surgical Training”

2. Education and training
2.1 Sufficient practical experience must be available within the programme to support acquisition of competence as set out in the curriculum.
2.2 There must be an appropriate balance of elective and emergency work with opportunities for learning.
2.3 During the course of the programme, the trainee should be allowed increasing responsibility for the investigation and management of both inpatients and out-patients.
2.4 Trainees should receive training in the paediatric component of their specialty by treating children in dedicated paediatric facilities.

2.5 Most trainees will undertake such training in a dedicated paediatric surgical unit.

2.6 It will be possible for part of the training to be undertaken in the context of an adult urological unit, providing that:
   2.6.1 The paediatric practice is conducted within dedicated paediatric facilities
   2.6.2 There is a period of attachment to a dedicated paediatric surgical / urological unit

2.7 The duration of training will usually be at least 6 months. The exact duration of training will depend upon the acquisition of the relevant competencies defined within the curriculum.

3. Timetable

3.1 The timetable should contain an appropriate mix of operating sessions, outpatient clinics, ward rounds and other clinical activities.

3.2 There should be a minimum of one timetabled session for private study / research and for administration.

3.3 There must be sufficient beds and sufficient operating lists for the number of trainees in the unit with adequate numbers of operating lists so that each trainee obtains adequate operative experience.
   3.3.1 The urological trainee must be able to obtain adequate operative experience without disadvantaging trainees in paediatric surgery working in the same unit.

3.4 There must be opportunities to discuss those children scheduled for operation with the consultant prior to the operating list.

3.5 There must be consultant led ward rounds where there is the opportunity to discuss patient management, including pre and post operative issues.

3.6 There must be exposure to appropriate multi-disciplinary clinics, with at least one elective outpatient clinic per week in which the trainee sees both new and
follow-up patients and is able to discuss the findings and management plan with his/her supervising consultant.

3.7 There must be an involvement in the assessment and management of patients who present with paediatric urological conditions on an emergency basis.

3.8 It is inappropriate for urological trainees to be directly involved in the management of paediatric general surgical conditions on an emergency basis.

3.9 An emergency receiving rota must recognise the restrictions of the EWTD

4. Support and development of trainees, trainers and local faculty

4.1 Trainees must be supported to acquire the necessary skills and experience through induction, effective educational supervision, an appropriate workload, personal support and time to learn.

4.2 The standards for this support are defined in the JCST Document “Standards for Surgical Training”

5. Standards for trainers

5.1 Trainers must provide a level of supervision appropriate to the competence and experience of the trainee.

5.2 The generic standards for trainers are defined in the JCST Document “Standards for Surgical Training”

5.3 Trainers in paediatric urology must have a regular commitment to the urological care of paediatric patients

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