The last General Surgery SAC meeting took place at the RCSEng on Wednesday 23rd January 2019.

Summary points
Trainees are encouraged to create and upload JETS consolidation sheets to their ISCP as PDFs as evidence of progression of their endoscopic skillset. Consolidation sheets can be created upon login to JETS logbook.

Training opportunities during winter pressures – Trainees are to be encouraged to use ‘exception reports’ to record loss of training as well as overworking due to winter pressures.

General Surgery Curriculum – An outcome from the GMC is still awaited. It is believed that the new curriculum will unlikely be ready for release until August 2020.

Mandated, optional and aspirational courses – The SAC in conjunction with TPDs are collating a list of courses for each category. It is anticipated that funding will be available for all mandated and optional courses.

Breast Surgery as a separate specialty – Based on feedback from the GMC about the revised curriculum, there has been discussion regarding breast surgery separating from general surgery. One particular issue would be approximately a 20% reduction in general surgical registrars. The JCST Chair will be producing an appraisal document listing the benefits and drawbacks for breast separating from General Surgery which will be presented to the Curriculum Oversight Group at the GMC.

Improving surgical training (IST) – HEE will be conducting an analysis surrounding the success of the IST pilot.

Academic training ARCP – The academic element of progress is discussed separately to ARCPs and so an academic representative is not required to discuss clinical competence at the ARCP unless it is an adverse outcome.

General Surgery of Childhood – Management of testicular torsion – It was generally felt that whilst there may be capacity to provide exposure to testicular torsion during general surgical training not all regions could ensure full competence. It was suggested that local trusts should be responsible in deciding upon the delivery of such cases including paediatric support whilst ensuring the people handling these cases were qualified to do so.

ISB Exam in General Surgery – SAC members considered where Section 1 (written) of the ISB should sit in terms of the new curriculum and whether sitting at the end of Phase 1 as a condition to progress was appropriate. There was opposition to this view as it may both hold trainees back or promote trainees taking the exam early even if not fully prepared.

If you have any particular issues relating to your training, please get in contact at the listed web addresses.