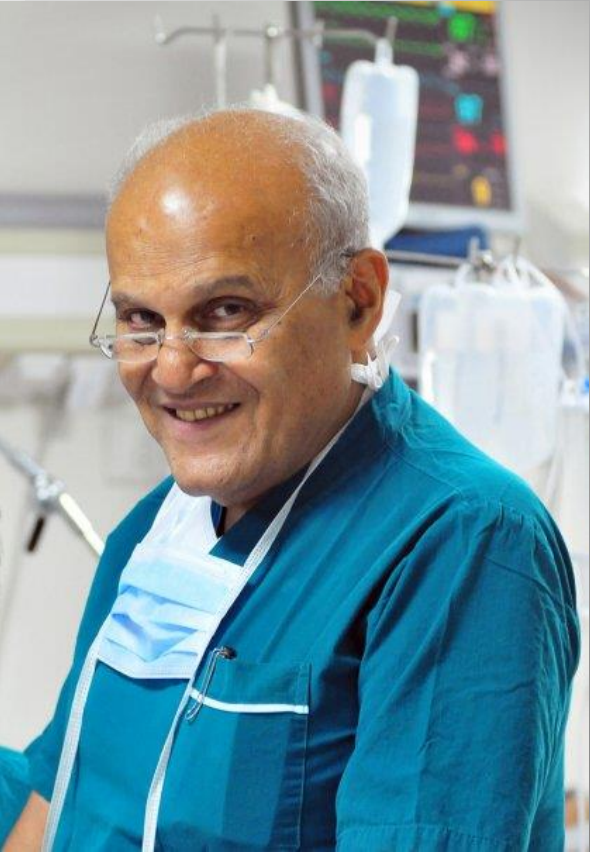
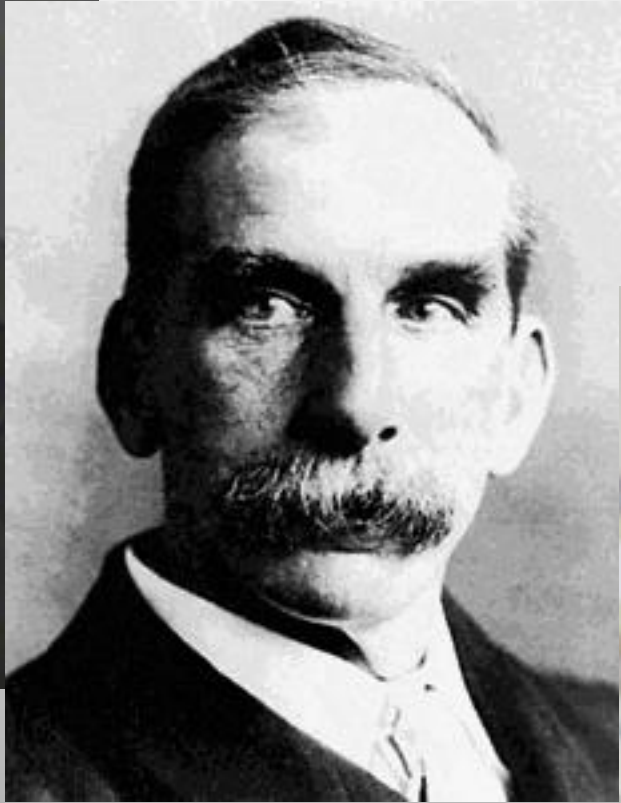
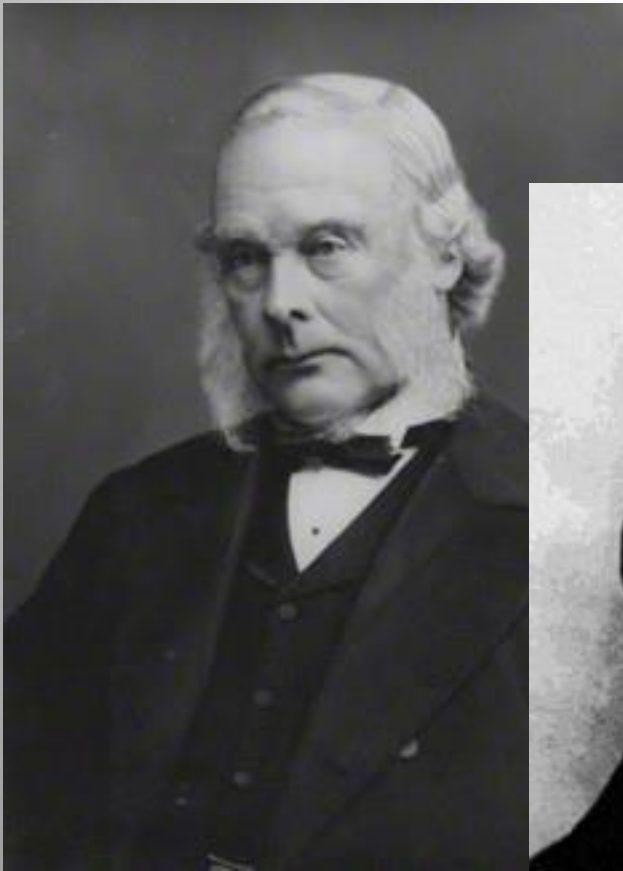


“Looking across the pond”:

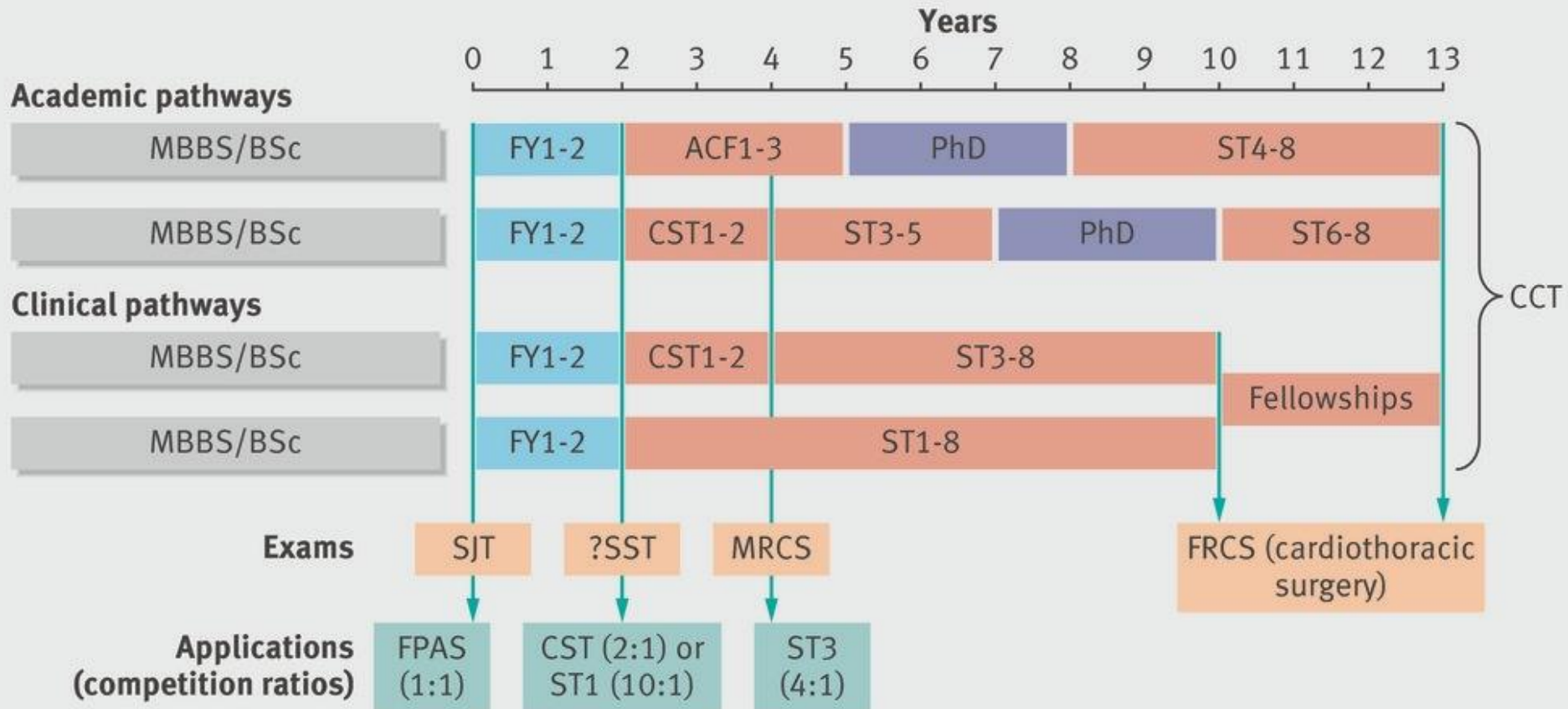
Do surgical educators need to consider more emphasis on technical surgical skills in the UK’s current surgical training programme

DSZM Boctor; SBL Low; JM George





Surgical Training Pathway



- Key**
- ACF = Academic clinical fellowship
 - CCT = Certificate of completion of training
 - CST = Core surgical training
 - FPAS = Foundation programme application system
 - FRCS = Fellow of Royal College of Surgeons
 - MRCS = Member of Royal College of Surgeons
 - SJT = Situational judgement test
 - SST = Specialty selection test (currently in pilot)
 - ST = Specialty training

Core Surgical Training

- Annual Review of Competence Progression (ARCP)
 - Workplace-based assessments (WBAs)
 - Case-based discussions (CBDs), Clinical examination exercises (CEXs), Directly observed procedures (DOPs)/Procedure-based assessments (PBAs)
 - Mini peer assessment tool (mini-PAT)
 - Audit reports
 - Examinations
 - Courses
 - Research activity - meetings, presentations, publications
 - Teaching
 - Logbook (Index cases)
 - Management and leadership roles

Higher Training Shortlisting Criteria 1

ASSESSED IN THIS SELECTION	DESIRABLE CRITERIA	0 POINT	1 POINT	2 POINTS	3 POINTS	4 POINTS
ADDITIONAL QUALIFICATIONS UNDERGRADUATE	Intercalated B.Sc.	No evidence	B.Sc 2:2	B.Sc 2:1	B.Sc 1st	
ADDITIONAL QUALIFICATIONS	PhD/MD in Progress or completed	No evidence	PhD/MD still in progress	PhD/MD finished but not written	Awaiting viva PhD/MD	PhD/MD
PRIZES/ AWARDS	Undergraduate or national prize	No evidence	Undergraduate prize	Postgraduate prize	National Award	International award
TRAINING COURSES	Courses relevant to cardiac and thoracic surgery	No Evidence	Core skills	Basic cardiac and thoracic skills courses	Intermediate Skills Courses	DSTS, DTS, TOE, VAT courses

Higher Training Shortlisting Criteria 2

ASSESSED IN THIS SELECTION	DESIRABLE CRITERIA	0 POINT	1 POINT	2 POINTS	3 POINTS	4 POINTS
PRESENTATIONS	National or International presentation	None	Departmental presentation	National<2	National>3	International
PUBLICATIONS	Peer review journal publications	No evidence	Non peer review journal or Single case report/published abstracts	Peer review Journal < 2 publications	Peer review journal 2 or more publications	Peer review journal 5 or more publications
RESEARCH SKILLS	Taking part in research/ principal investigator	No research	Taking part in research	Key member of research team	More than one research project completed	Principal Investigator/ Co investigator on a peer reviewed grant
AUDIT	Experience of Audit	No evidence	Participated in Audit but incomplete	Audit completed but loop not closed	Initiated and managed the audit, loop completed	Evidence of sustained in practice as a consequence of audit

European Working Time Directive (EWTB)

- Law passed by European Parliament
- Accepted into UK law
- Based on Health and Safety principles
- All EU workers
- Dictates:
 - 56 hrs/week from August'07 and 48 hrs by August'09
 - Rest requirements



Disadvantages

- Decreased time spent in active training programs
- Lack of continuity in patient care
- Dependence on rota management and staffing adequacy



WHAT IS THE IMPACT???

Literature

- Less time spent in theatres (DOH and Social security 1971)
- Exposure to operative cases have reduced by 20% (Stevens et al 2007; Garg et al 2003)
- **Perceptive:** Operative ability has reduced (Parsons et al 2007)
 - 90% of SpRs, 84% of SHOs – ↓ operative ability
 - 88% SpRs, 76% SHOs – ↓ surgical training

Literature

- **Objective:** Operative ability has reduced (Parsons et al 2007)
 - Old vs current training - 90% vs 28% could perform open appendicectomy (unsupervised) at the end of SHO training
- No study has looked at how much junior surgical residents practise their surgical skills

Our study is the **FIRST STUDY** to quantify the time spent by junior surgical residents practising their surgical skills

OUR STUDY

Methods

- Questionnaire study
- 83 UK junior surgical doctors

Practising your surgical skills outside of working hours?

Education

Summary

Design Survey

Collect Responses

Analyze Results

Edit Survey

Survey Options

▶ Question Bank



Print Survey

Restore Questions

Page Randomization



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Practising your surgical skills outside of working hours?

Questionnaire: 5 questions

- 1. Which of the following best describes your current job level?
- 2. Outside of working hours, IN AN AVERAGE WEEK, HOW MUCH TIME (MINUTES/ HOURS) would you say you spend doing training/career-related things

Questionnaire: 5 questions

- 3. Outside of working hours, IN AN AVERAGE WEEK, HOW MUCH TIME would you say you spend on practising your SURGICAL/TECHNICAL SKILLS?
- 4. Outside of working hours, IN AN AVERAGE WEEK, HOW MUCH TIME (MINUTES/ HOURS) do you feel it would be important to spend practising your surgical/technical skills?

Questionnaire: 5 questions

- 5. If your answer to Question 4 is GREATER than your answer to Question 3:
 - Outside of working hours, what areas of training/career-related activities do you think surgical trainees should spend less time on?
 - Feel free to make any other comments you feel strongly about.

Results

- 31 responders
- Ideally: 168 mins/week to practise surgical skills
- Reality: 38 mins/ week
- Paperwork commitments → Discrepancy



Discussion

- Simulation
- Mental imagery
- Distributed learning

Conclusion

- First study to quantify time spent on practising surgical skills by junior trainees
- Surgery = Craft skill
 - 10,000 hours in deliberate practice for expertise; Ericsson 2004
- Consider diversion of time spent on paperwork to surgical skills