SAC Meeting 1st December 2009, Royal College of Surgeons of England

Trainee Representatives Report

Charles Keys and Clare Rees

Personnel

Mr Huddart has been appointed as new Intercollegiate representative to SAC.
Mr Madden attended SAC as BAPU president.
A BAPU representative to SAC will be appointed this week.

Matters arising from last Meeting's Minutes

Correspondence form Chris Munsch JCST was discussed regarding the General Paediatric Surgery services in District General Hospitals. It is anticipated that as older adult general surgeons in DGHs who currently perform paediatric surgery retire they will not be replaced by surgeons who can continue to provide this service. Unless general surgeons are trained in surgery of childhood this work will need to be taken up by paediatric surgeons, but this will swamp the system. It was noted by the SAC that this is not a new debate or problem, and that it was not in the remit of the SAC to solve it. However, it was felt that most centres would have the capacity to offer to take adult surgical trainees for periods of training in childhood surgery. However, funds would have to be given by the Strategic Health Authorities to fund posts in the DGHs.

A request from the RCS England Staff and Associate Specialist committee for representation on the SAC was considered. Due to small numbers (5-6 in UK) it was not felt necessary to have specific representation, but there is nothing to prevent these doctors being on the SAC via usual routes.

Note that a 10th SAC is likely to be created for Core Training. This will include members from all 9 specialities.

National Recruitment

The dates for advert, short listing and interview have been set. Advert 8th March 2010, closing date 6th April 2010, short listing by 25th April 2010 and interview 6-7th May 2010 in Newcastle.
The final draft of the person specification document has been created. It was noted that ALL aspects of the person spec form will be tested in the 4 stations during the interview process.

ISCP and Curriculum Development

Mr Haddock presented a review of all new style trainees in the UK and their current progress on the ISCP website. This included looking at whether each trainee had an educational supervisor, set learning agreements and performed WBAs. Of note approximately 40% of trainees had no learning agreements and approximately 50% of trainees have performed zero WBAs. This is of great concern to the SAC because if the set amount of WBAs have not been completed by August 2010 trainees will be failed for that year of training. Currently this would be a large proportion of trainees. The SAC will be writing to all trainees and trainers regarding this soon.
It was noted that if trainees are finding it difficult to engage trainers in this process they should approach their programme director to solve any issues.

Paediatric Urology

The question regarding Paediatric Urology becoming a subspecialty in its own right was discussed. The president of BAPU informed the SAC that BAPU's aspiration is that Paediatric Urology should gain subspecialty recognition. The process for this to take place now exists via a PMETB application and this process will now be initiated.

It was noted that there are currently 7 urology fellowship posts. 3 in London deanery, 1 in Manchester, 1 in Leeds, 1 in Birmingham and 1 in Nottingham. These are intended to be post CCT posts and ideally would last for 2 years.

If urology becomes a subspecialty it is not clear what will happen to the exam.

Annual Specialty Reports

The ASRs from each region were reviewed. Overall the feedback was that training throughout the country is in good shape but some perennial problems are occurring and one or two specific issues need to be sorted. The most common problems are surrounding induction at jobs, service being a priority over training especially for more junior trainees and engaging trainers in the new curriculum. Centres with areas of concern may receive a targeted visit in the future. Overall however it was felt that training standards are good with some moments of excellence.
The regional ASRs will be assimilated into a final report by Mr Haddock.

Role of Trainee Representatives on Specialty Training Committees (STCS)

Each of the consortia has an STC and each STC should have a trainee representative. Currently we know who 3 of these reps are. The role of these representatives is to attend

STC meetings to represent trainees' views, and to be the voice back to the trainees from the committees. They do not need to be preset in other trainees ARCP/RITA interviews.

Can anyone who is a STC representative let either myself or Clare know who you are please.

European Working Time Directive Survey

It was noted that the impact on Paediatric Surgery of the EWTD is not known.
The trainee representatives have written a survey looking at the implementation of the EWTD, patient safety and impact on training. It is a survey for both trainees and trainers working in the UK. It has the support of BAPS and the SAC indicated that it would fully endorse this survey and would be very interested to hear the results. The SAC members committed to filling in the questionnaire.

Trainee Representative

Charles Keys is taking a post in Melbourne in February 2010 for 12 months. He intends to return to the position of trainee rep in February 2011. We will be seeking a replacement representative to commence in February 2010.