

Appendix A

Training Pathways for the Plastic Surgeon in General and the Plastic Surgeon with Special Interest

(Final Years Specialist Trainees 7 & 8)

The trainee is permitted to choose at the commencement of Final Years training whether they will become a Plastic Surgeon with Special interest or become a Plastic Surgeon in General. The model is for all trainees to undertake a minimum 6 modules over 2 years but are not limited by this and could potentially undertake one or two more in additional areas of interest if opportunity and progress allow. The programme is competency-based not time-based although it is envisaged that for most trainees an indicative 4 months would be spent on each module.

A. Plastic Surgeon with Special Interest incl. Training Interface Group fellowships

There are two possible career pathways for those wishing to develop special interest practice:

- The first of these is to study on one of the TIG fellowships (cross-specialty training).
- The second is to undertake training within the monospecialty i.e. solely within plastic surgery.

We aim to develop really attractive first class programmes both in the interface areas and those that remain as monospecialty areas encouraging trainees to consider UK-based programmes for at least part of their Final Years experience.

The TIG programmes currently include Hand, Oncoplastic Breast, Head & Neck, Cleft, Reconstructive Cosmetic and Soft Tissue Trauma.

The difference between the two pathways is that the cross specialty trainee will have a wider skill set and may take advanced competencies in areas that are not primarily rooted in our discipline, reflecting the ethos and practice of the Interface platform. For example the trainee undertaking TIG fellowship in Oncoplastic Breast may take advanced level competencies in Breast Cancer management.

Craniofacial surgery is not a TIG programme at the present time and would be available for study only as part of Special Interest training within the monospecialty.

B. Plastic Surgeon in General

Recent survey has demonstrated that many trainees wish to pursue a more general approach to their specialty (PLASTA survey 2010). There is a need to develop attractive and effective programmes for those who wish to stay more general in their practice. It is important that the generalist is seen as having depth in a range of areas and we would anticipate completion of 6 modules over the 2 year training period. It is vital for service delivery that there is a trauma element supporting competencies relevant to on call work. There also needs to be a commitment to oncology either in the

form of skin oncology or oncoplastic breast practice as these constitute a major part of the plastic surgery workload in the UK. Beyond this there are a wide variety of other niches that the trainee may select according to interest, opportunity and perceived future service needs. Some will wish to pursue an interest in aesthetics and there is a pressing public safety issue that they be well trained for this role. For those not wishing to have an aesthetic practice there exist a good choice of alternative options. The monospecialty trainee will not be able to do Head & Neck Surgery, Cleft or Craniofacial surgery (from programmes in the UK) but can choose selected modules from: Aesthetics, Burns, Complex Wound, Genitourinary Reconstruction, Hand, Lower limb trauma, Oncoplastic Breast, Skin Oncology.

Career options for those wishing to maintain a wider base to their practice than those choosing to fully develop a special interest has been an important priority for those developing the Later Years Curriculum. It is envisaged that those participating in this Syllabus would train just within Plastic Surgery and are not participating in Interface Fellowships (excepting Reconstructive Cosmetic and Soft Tissue Trauma which differ from the others in being of only 3 months duration). Whilst respecting the need to stay 'general' there is also a need to demonstrate proficiency in a range of areas to gain the title 'Plastic Surgeon in General.'

The Plastic Surgeon in General would spend their 2 final years in training and would need to cover 6 modules in that time which is the same number as their colleagues who are developing a specific special interest.

Entry to the Final Years training is not automatically linked to passing FRCS(Plast) at the end of Intermediate Years with decisions regarding progression left being a matter for the Programme Director informed by the ARCP.

The Final Years Syllabus supports trainees to obtain relevant skills whilst maintaining standards and encouraging the most appropriate placements to enable delivery of the curriculum.

The areas of Cleft, Craniofacial and Head & Neck oncology are regarded as areas only suitable for those who have declared a special interest in the same and will be undertaking specific fellowships in these areas. For this reason Modules from these Syllabus areas are not available for the Plastic Surgeon in General.

There would be mandatory elements of developing skills in an area of trauma practice, an area of oncological practice and either aesthetics or another area as specified. For the Plastic Surgeon in General these would need to include:

- Trauma
 - 2 modules from Hands Syllabus*
 - or
 - 2 modules from Burns Syllabus*
 - or
 - 2 modules from Lower Limb Trauma Syllabus*

* Includes Complex Wound Module as one further choice within this section

AND

- Oncology
 - 2 modules from Skin Oncology Syllabus
 - or
 - 2 modules from Oncoplastic Breast Syllabus

AND

- Aesthetics or other interest
 - 2 modules from Aesthetics Syllabus
 - or
 - 1 module Genitourinary Reconstruction (GUR) Syllabus
 - or
 - 1 module Ear Reconstruction Syllabus
 - or
 - 2 *additional modules from the previous sections*