

Overview of changes to the new General Surgery Curriculum

Phases of training

The Intermediate and Final Stages of training described in the previous curriculum have been replaced by two phases of training, phase 2 and phase 3. Phase 1 of surgical training is covered by the core surgery syllabus. The pathway for training has been defined more clearly.

Syllabus skill levels

For Knowledge and Clinical Skills – skill levels have been removed and the broad high level outcome topic retained.

The exception is for Knowledge and Clinical Skills in the specified Critical Conditions.

For Operative skills – differing technical skill levels are specified for each module. Skill levels at the end of phase 2 equate to previous levels at ST6

Updating the Syllabus

There have been changes in general surgical practice with increased emphasis on emergency general surgery (EGS) care, the development of an oncoplastic philosophy of care in breast surgery, the establishment of major trauma centres, increased specialisation in the management of upper gastrointestinal conditions and rationalisation of transplant services. Nevertheless, Employers have identified a need to train some individuals in a broader range of skills. General Surgery of Childhood (GSoC) is recognised as an area requiring training and expansion to allow children to be treated in hospitals close to home. These changes have been addressed as follows:

- The development of specific oesophagogastric, hepatopancreaticobiliary and trauma special interests in this curriculum reflects the changes in service reconfiguration over the past few years.
- The current lack of provision of general surgery of childhood is addressed by enabling trainees to develop GSoC alongside another special interest.
- The introduction of a gastrointestinal module incorporating general surgery of childhood is in direct response to identified needs of the service in some parts of the UK. This special interest module will provide trainees with a general route to CCT equipping them with technical skills across a broad range of open and laparoscopic abdominal operations, endoscopy and paediatric day case procedures.
- The development of oncoplastic breast services has resulted in the breast special interest section being completely rewritten to reflect the training needs of a modern day breast surgeon.

Rationalisation of syllabus

To avoid repetition, topics within special interest areas have been amalgamated

A list of critical conditions has been incorporated into the curriculum and all trainees will be expected to be competent in managing these conditions

Index procedures and indicative have been updated to reflect changes in practice around breast surgery, transplantation and the new special interest modules.

The requirement for a minimum number of cases has been removed.

Training Pathway

Trainees following certain modules outlined in the curriculum will not be required to do emergency work in their final two years of training. All trainees will be able to manage the unselected take up to the point of operation and all will be able to manage postoperative care.

Outcomes

High level outcomes (Capabilities in Practice – CiPs) have been introduced alongside the nine Generic Professional Capabilities (GPCs). These are given equal weight in assessing trainees through Multiple Consultant Report (see below).

Assessments

A new assessment tool (the Multiple Consultant Report – MCR) has been introduced.

Reduced reliance on required numbers of other workplace-based assessments.