

Appendix 5: Courses and other learning opportunities away from the workplace

Some knowledge and capabilities are best gained in the formal setting of a taught course. In General Surgery there is one mandated course.

Trauma learning outcomes	Rationale for learning by attendance at a course	Phase of training	GPC	CiP	Examples of ways to meet trauma learning outcomes
Competency in the assessment, treatment and ongoing management of the multiply injured patient	Cannot be learned in the workplace to the level required for patient safety Allows a systematic process of teaching a safe and reliable method of immediate management of severely injured patients and comprises a range of comprehensive and adaptable trauma management skills relevant to all specialties	Current throughout training	Domain 2: Professional skills Domain 3: Professional knowledge Domain 5: Capabilities in leadership and team working	2) Manages the unselected emergency take	The Advanced Trauma Life Support® (ATLS®), European Trauma Course, Definitive Surgical Trauma Skills course or equivalent locally provided course(s) meeting the outcomes described

Learning outcomes	Rationale for learning by attendance at a course	Phase of training	GPC	CiP	Examples of ways to meet learning outcomes
Upper GI Endoscopy (OGD) – Basic Skills competencies <i>Core Technical Skills</i> - Safe and effective scope handling and navigation - Intubation of the oesophagus, stomach, and duodenum	Curriculum requirement for upper gastrointestinal endoscopy (OGD, Gastroscopy) Colonoscopy, and Flexible Sigmoidoscopy Accreditation by JAG Joint Advisory Group on GI Endoscopy	Phase 2	Domain 2: Professional skills Domain 3: Professional knowledge	2) Manages the unselected emergency take 4) Manages an operating list	JAG basic skills course in gastroscopy or colonoscopy or recognised equivalent

• Identification of key anatomical landmarks • Recognition of normal and abnormal mucosal appearances <i>Peri-Procedural Management</i> • Patient preparation and consent • Sedation and monitoring • Post-procedure care and documentation Colonoscopy – Basic Skills competencies <i>Core Technical Skills</i> • Safe insertion and withdrawal of the colonoscope • Intubation of the terminal ileum • Recognition of colonic anatomy and pathology • Minimising patient discomfort and maximising mucosal visualisation • Early exposure to polypectomy techniques • Polyp detection and classification • Competency in removing: • 2 stalked polyps • 2 cold snare polyps • 2 small sessile lesions/EMR at both Level 1 and Level 2 (SMSA scale) • Use of optical diagnosis systems	(or recognised equivalent) is a requirement for surgical trainees developing endoscopy skills. These competencies cannot be delivered in the workplace in a standardised way. Course delivery ensures: 1. Standardised training – consistent delivery of competencies, avoiding variability across hospital settings 2. Protected learning time – allows focused skill development without service demands 3. Access to simulation – hands-on practice with high-fidelity models not typically available in hospitals 4. Expert supervision – guarantees feedback from accredited trainers, which may be limited or inconsistent in workplace training 5. Peer learning environment – facilitates collaborative learning and reflection, enhancing understanding and retention.		Domain 5: Capabilities in leadership and team working		
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