

## ST3 – ST8 SPECIALIST TRAINING INFORMATION



## ▶ PLASTIC, RECONSTRUCTIVE & AESTHETIC SURGERY 2020

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## 1. Welcome

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Dear Trainee

Congratulations on your appointment to Specialty Training in Plastic, Reconstructive & Aesthetic Surgery (ST3-ST8).

As a specialty, we continually review the training programme and identify areas we can improve upon. Equally, we aim to introduce new incentives that will contribute to the quality of training experience.

Take time to read this document, as it will aid you in your development through each year of training from ST3 to ST8.

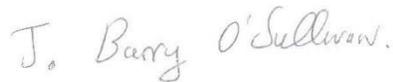
There are processes in place and these must be followed in order to ensure the smooth running of the training programme.

In particular, I would advise you to give your Specialty Administrator, your Consultant Trainers and your Programme Director as much notice as possible when you require their assistance.

In my role as Programme Director, I am here to fully support you in your training. Please contact your Specialty Administrator, Roisin Scally, should you require any assistance. Roisin will be happy to direct your queries to me.

I hope that your experience of Specialty Training in Plastic, Reconstructive & Aesthetic Surgery will be a positive one and may I wish you the best in your surgical training career.

Yours sincerely



Mr Barry O'Sullivan  
Programme Director for Specialty Training in Plastic, Reconstructive & Aesthetic Surgery

## 2. Rotations

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Specialty training in Plastic Surgery is a six-year programme. During your time on the programme you will rotate through the majority, if not all, of the accredited training post hospitals.

### Accredited Training Post Hospitals:

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Beaumont Hospital
Connolly Hospital
Cork University Hospital
University Hospital Galway
Mater Misericordiae University Hospital
Children's University Hospital Temple Street
St James's Hospital
Our Lady's Children's Hospital Crumlin
St Vincent's University Hospital

### 3. Plastic Surgery Training Committee

The RCSI Plastic Surgery Training Committee's role is to oversee and approve the processes and policies of Specialty Training in Plastic Surgery in Ireland. The Committee's mandate is training and they have no role in matters of industrial relations.

The current members of the RCSI Plastic Surgery Committee are:

<b>Programme Director for Specialty Training</b>	Mr Barry O'Sullivan
<b>CST Programme Director for Plastic Surgery</b>	Ms Marlese Dempsey
<b>SAC Representative</b>	Mr Brian Kneafsey
<b>IAPS President</b>	Mr Brian Kneafsey
<b>St James's Hospital Training Representative</b>	Mr Christoph Theopold
<b>Mater Misericordiae University Hospital Training Representative</b>	Ms Shirley Potter
<b>Cork University Hospital Training Representative</b>	Mr James Clover
<b>University Hospital Galway Training Representative</b>	Mr Niall McInerney
<b>St Vincent's University Hospital Training Representative</b>	Ms Roisin Dolan
<b>Beaumont Hospital Training Representative</b>	Mr Nadeem Ajmal

## 4. Intercollegiate Surgical Curriculum Programme (ISCP)

The ISCP ([www.iscp.ac.uk](http://www.iscp.ac.uk)) provides the approved framework for surgical training from completion of ST3 through to ST8 and sign off for Certificate of Completion of Specialist Training (CCST).

It achieves this through a comprehensive syllabus link: <https://www.iscp.ac.uk> which lays down the standards of specialty-based knowledge, clinical judgement, technical and operative skills and professional skills and behaviour, which must be acquired at each stage of training in order to progress and allows the Trainee to maintain a portfolio via the site to record the various work based assessments (WBA), E-portfolio and Annual Review of Competence Progression (ARCP) as a Trainee progresses through ST3 - ST8 years of training.

All Trainees commencing Specialty Training in ST3 will be required to sign up to the ISCP.

You will use this ISCP throughout your surgical career from ST3 onwards and you should use it as your portfolio to record all your achievements, publications, presentations, audits and surgical cases etc. it is important to point out that YOU are responsible for driving your training and ensuring that you have the evidence to support your training and the required competencies that need to be reached each year for progression through specialty training along with successful completion of the FRCS exam and ultimately the award of your Certificate of Completion of Specialist Training (CCST). RCSI will support you and your Specialty Trainers to ensure your training is being delivered and assessed.

RCSI Support - RCSI is committed to offering support and training to all trainees and trainers using ISCP. Training sessions are run regularly at various hospitals to support your trainers on how to manage and utilise the ISCP platform. These sessions are then open to trainees to attend following the main event for the trainers. Furthermore, Trainee days are also run in RCSI and our ISCP Trainer Helen Harty along with your ST Administrator are available on email and phone to support queries. The ISCP Helpdesk (0044 207 869 6299 or [helpdesk@iscp.ac.uk](mailto:helpdesk@iscp.ac.uk)) can also be contacted. If you or your specialty colleagues wish to have organised training session please contact your ST Admin who will help to facilitate this.

The RCSI pays all ISCP fees for appointed ST3 –ST8 Trainees, please do not pay the ISCP fee directly this will be managed via the RCSI and your ST admin.

In summary, ISCP is an online platform which will house your training information, most notably the following:

- Placement history
- Curriculum Vitaes
- Learning Agreements
- Work Based Assessments:  
Case Based Discussions CBDs, Clinical Evaluation Skills CEXs, Procedure Based Assessments PBAs, Directly Observed Procedures DOPs and Multi-Sourced Feedback MSF's

#### Evidence

- Annual Review Competency Progression

- **RCSI Logbook**

RCSI has developed its own RCSI logbook and trainees progressing from CST will continue to use this logbook to record activities as normal. The logbook will be available to view by your Training Programme Directors and Trainers for key events such as ARCPs.

If you have not previously used RCSI Logbook you will need to access the logbook via mSurgery.ie via your RCSI account.

All Trainees commencing Specialty Training at ST3 are required to sign up. Technical queries for this should be logged with IT Support desk with the subject **MSurgery Queue –Logbook** in the title.

#### ISCP aims

- Structured and supervised framework with definable endpoint
- Clear standards
- Fully integrated assessment system
- Promote professionalism
- Patient safety and improved care

#### Trainee benefits

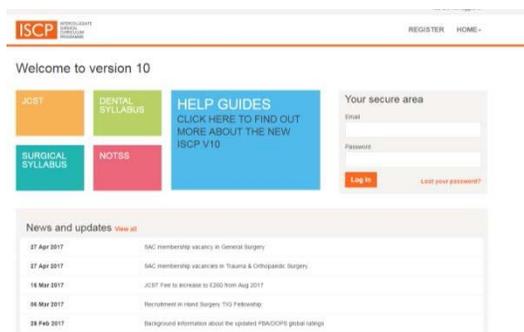
- Consistent training experience
- Interaction with Trainer
- Educational feedback from Trainer
- Training of Trainers
- Clearly defined syllabus
- Online Portfolio of evidence

## 5. Trainee Paperwork

It is highly recommended that you cultivate **good organisational habits** from the start of the programme and keep up-to-date with your on and off-line paperwork.

Now that you will be using ISCP most of your paperwork will be **online**. You will need to **register** with the site ([www.iscp.ac.uk](http://www.iscp.ac.uk)).

- For instructions on how to register click [here](#)
- For an ISCP Overview click [here](#)



You will need to do the following:

- Create your **Learning Agreement on ISCP** with the **Assigned Educational Supervisor** and set **learning goals** for this 12-month placement.
  - You will need three meetings per Learning Agreement which you will also need to sign off on; at least one Clinical Supervisor Report and then an AES Report also needs to be completed.
  - Add the other Trainers in your unit and your Mentor as Clinical Supervisors. You will need at least one Clinical Supervisor Report before your AES can complete their AES Report. The AES report will not even be visible to your AES until a Clinical Supervisor report has been completed.
  - For the final LA meeting please advise your AES to type 'see AES Report'. Then your AES will just need to complete an AES Report for you. This should minimise the work the AES needs to do back to three meetings rather than four stages. So it is essential to tackle as soon as you commence each new placement.
- Aim to complete **one WBA on ISCP per week**.
  - In terms of diversity you will need a **minimum of three from each category** (Case Based Discussions CBDs, Clinical Evaluation Skills CEXs and Procedure Based Assessments PBAs) per six months.
- You will also need to submit **one Multi-Sourced Feedback on ISCP** (MPAT/MSF) in your ISCP portfolio in this calendar year. This takes time as you need a minimum of eight 'raters' to rate you.

- Your **Curriculum Vitae** needs to be uploaded to ISCP each year in advance of your review (ARCP).
- Add your **certificates of attendance at courses** to ISCP under 'Courses/e-learning' in your other evidence section.
  
- **RCSI Logbook**  
The logbook will be available to view by your Training Programme Directors and Trainers for ARCPs.

## 6. Plastic Surgery Training Requirements

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### Mandatory Technical Courses

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The following technical courses are mandatory and should ideally have been achieved before presenting for the Intercollegiate Fellowship:

1. Microsurgery course
2. Hand Surgery (Core Hand Surgery course), RCSEng
3. Flap anatomy and dissection course
4. Hand Fixation, UK
5. ATLS

In addition, each Trainee should attend at least one of the BAPRAS or BSSH instructional courses for each year of training. Similar courses may be substituted for these latter courses by prior agreement with the trainee's current trainer and the Programme Director.

### Mandatory Teaching Days

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Each year, a number of teaching days will be organised, which are mandatory to attend for all trainees. These will include: the Plastic Surgery session at Charter Day, a Human Factors class, the ASPS In-service exam in March, and other set teaching dates covering the ISCP Plastic Surgery syllabus. Dates will follow when confirmed.

### Designated Indicative Core Surgical Procedures

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This is a list of commonly performed plastic surgical procedures that range in complexity, from simple to intermediate. A newly appointed plastic surgeon operating in the generality of the specialty would ordinarily be expected to be able to carry out all of these procedures.

These procedures are sufficiently commonly performed that a Trainee should be able to achieve proficiency in all of them within the first four years of training and should have demonstrated this before presenting for the Intercollegiate Examination. As soon as the trainee has reached a level of proficiency

that allows them to carry out the procedure with the consultant unscrubbed, the Trainee should ask the Consultant Trainer to complete the competency form for that procedure.

The cumulative and six monthly record of completion of these forms will be assessed at each counselling session.

**Your indicative numbers must be presented to the ARCP panel annually in percentage format – a template will be provided for this.**

## Completed Audits

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Each Trainee should carry out at least one complete audit per year of an aspect of their own or their training unit's practice. Guidance on an appropriate subject and methodology will be given by the training consultants, but it is the responsibility of the trainee to initiate this within three weeks of starting each new training placement. The audit should include (with attached copies of relevant published literature):

- Discussion of the choice of audit subject
- Discussion of the choice of standard against which current practice will be audited
- Outcome of initial audit of current practice and variance of results from chosen standard
- Measures taken to improve practice
- Final audit and closure of audit loop



## Copies of Published Papers

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All relevant publications by the trainee should be kept in this section of the training portfolio and assessed at each counselling session

## Portfolio Cases

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Each Trainee should present a minimum of four portfolio cases per year. These are cases in which the trainee has been directly involved in the patient's management. They should be presented in a similar format to a case report and should include a detailed critique of the management chosen and possible alternatives. The patient's consent for publication should be obtained for use of any clinical images.

Ideally these cases will have been presented and discussed in the unit as a teaching and learning exercise. Presentation as a printed PowerPoint format is acceptable, but copies of published literature relevant to the case should be appended in all cases. The cases should be signed off as accurate and satisfactorily discussed by the relevant consultant. The cases should be chosen to sample the breadth

of the curriculum in plastic surgery over the six-year training programme.

## **Consolidated Logbook**

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This should be presented in e-log book format, cumulative and for each six-month period and signed by the Trainees' Consultant Trainer. Please also consult the Indicative Logbook as a guide for optimum count per procedure.

## **Annual ARCP Presentation**

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The above information of your yearly progress should be provided in electronic format i.e. a PowerPoint presentation for your annual ARCP in May/June. A template will be provided.

You should present slides, which outline your progress in the areas numbered below:

1. Mandatory Technical Courses attended
2. Designated Indicative Core Surgical Procedures
3. Published Papers
4. Completed Audits (closed loop, at least one per year)
5. Portfolio Cases (minimum of 4 per year)

The JCST website should be consulted regularly to ensure you are achieving the competencies and benchmarks required for your CCST:

<https://www.jcst.org/quality-assurance/certification-guidelines-and-checklists>

## 7. Certificate of Completion of Surgical Training (CCST)

Firstly, before a Trainee can be signed off they need to pass the intercollegiate exam in Plastic Surgery.

Once we know the exam has been passed, the SAC need the following documentation:

- **ARCPs** covering the whole of your training
- **Consolidated Logbook**, signed by the Programme Director and covering the Trainee's six years on the training programme
- **Letter from the Programme Director** confirming he/she is happy to sign the Trainee off the programme (the College arrange this).
- **ATLS Certificate** Trainees need to be up to date with their ATLS or APLS qualification.

Once the documentation from point 1 has been submitted, the JCST sends out a form called a '**College Notification Form**' to the Trainee, which they need the Trainee to complete and return to the College to have signed by Professor Traynor (the Postgraduate Dean). Once the form has been signed by Professor Traynor, the College return the form directly to the JCST.

The JCST/SAC review all documentation in the Trainee's CCST application and make a decision on whether the training has been satisfactory enough for sign off. Any issues that are identified can result in an SAC decision for the Trainee to undergo further training.

## 8. Joint Committee on Surgical Training (JCST)

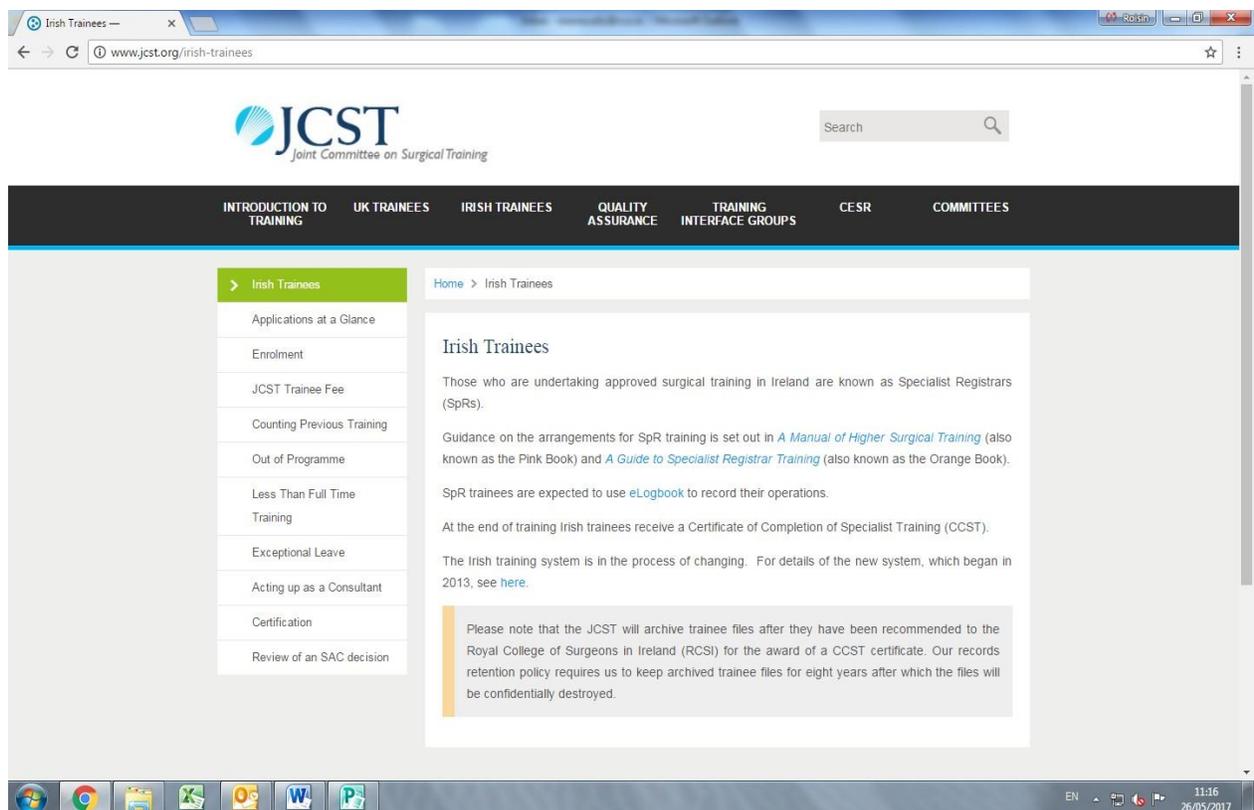
The JCST is an advisory body to the four surgical Royal Colleges of the UK and Ireland for all matters related to surgical training and works closely with the Surgical Specialty Associations in Great Britain and Ireland. The JCST is the parent body of the Specialty Advisory Committees (SACs) and the Training Interface Groups (TIGs).

You will need to supply a copy of your Certificate of Completion of Basic Surgical Training (CCBST) or Core Surgical Training Certificate (CST) to your ST Administrator email: [roisinscally@rcsi.ie](mailto:roisinscally@rcsi.ie)

Please contact the CST Administrator, in relation to this [coreST@rcsi.ie](mailto:coreST@rcsi.ie)

The JCST needs your CST/CCBST certificates in order to register you with the Specialty Advisory Committee (SAC).

<http://www.jcst.org>



The screenshot shows a web browser window displaying the JCST website. The browser's address bar shows the URL [www.jcst.org/irish-trainees](http://www.jcst.org/irish-trainees). The website header features the JCST logo (Joint Committee on Surgical Training) and a search bar. A navigation menu includes links for INTRODUCTION TO TRAINING, UK TRAINEES, IRISH TRAINEES, QUALITY ASSURANCE, TRAINING INTERFACE GROUPS, CESR, and COMMITTEES. The 'Irish Trainees' page is active, showing a sidebar with a list of links: Applications at a Glance, Enrolment, JCST Trainee Fee, Counting Previous Training, Out of Programme, Less Than Full Time Training, Exceptional Leave, Acting up as a Consultant, Certification, and Review of an SAC decision. The main content area is titled 'Irish Trainees' and contains the following text: 'Those who are undertaking approved surgical training in Ireland are known as Specialist Registrars (SpRs). Guidance on the arrangements for SpR training is set out in *A Manual of Higher Surgical Training* (also known as the Pink Book) and *A Guide to Specialist Registrar Training* (also known as the Orange Book). SpR trainees are expected to use eLogbook to record their operations. At the end of training Irish trainees receive a Certificate of Completion of Specialist Training (CCST). The Irish training system is in the process of changing. For details of the new system, which began in 2013, see [here](#).' Below this text is a yellow-bordered box with the following note: 'Please note that the JCST will archive trainee files after they have been recommended to the Royal College of Surgeons in Ireland (RCSI) for the award of a CCST certificate. Our records retention policy requires us to keep archived trainee files for eight years after which the files will be confidentially destroyed.'

## 9. JCST Certification Guidelines for Plastic Surgery

All trainees seeking certification in Plastic Surgery must:

- a) be fully registered with the GMC/IMC and have a licence to practise.
- b) have completed a recognised higher surgical training programme in the UK or Republic of Ireland.
- c) have successfully passed the Intercollegiate Specialty Board examination.
- d) have been awarded an outcome 6 at a final ARCP (gained all required competencies).

In order to be awarded an outcome 6 at final ARCP, the SAC would expect that trainees should be able to satisfy the following specialty specific guidelines:

	<b>Guidelines for Plastic Surgery</b>
<b>Clinical experience</b> - evidence of the breadth of clinical experience defined in the specialty syllabus	<p>Trainees must have experienced six years of progressive training rotating through posts in a minimum of two centres.</p> <p>Trainees must be competent in the management of procedures allied to emergency care and demonstrate experience in the management of the spectrum of elective sub-specialty areas that currently define the curriculum of Plastic, Reconstructive and Aesthetic Surgery.</p> <p>Trainees must have been trained in subspecialty clinics across the range of Plastic Surgery (headings considered as fundamental or essential are in bold lettering):</p> <p>Cutaneous plastic surgery: skin cancer, benign lesions, vascular malformations, laser surgery.</p> <p>Hand surgery: congenital, elective, trauma/emergency, rehabilitation.</p> <p>Head and neck surgery: cancer, facial palsy, facial skeletal trauma* soft tissue reconstruction (*a basic working knowledge of this area is required).</p> <p>Breast surgery: aesthetic, reconstruction.</p> <p>Paediatric plastic surgery: general, cleft lip and palate, cranio-facial, hypospadias.</p> <p>Burns: acute management / intensive care, reconstruction.</p> <p>Sarcoma.</p> <p>Oculoplastic: aesthetic, reconstructive.</p> <p>Aesthetic/Cosmetic: Facial and other rejuvenation procedures, body contouring procedure, surgery for massive weight loss, non-surgical procedures.</p> <p>Lower limb trauma: acute management, reconstruction, rehabilitation.</p> <p>Genito-urinary reconstruction: BXO, penile cancer, gender re-assignment (and ancillary procedures), vulval/perineal reconstruction.</p> <p>Microsurgery e.g. revascularisation, replants, free tissue transfers.</p>

<p><b>Operative experience</b> - consolidated logbook evidence of the breadth of operative experience defined in the specialty syllabus</p>	<p>Trainees must have undertaken, either as sole operator or with assistance, 2100 logbook operative procedures during the six years of training (as principal surgeon) in recognised training units.</p> <p>Trainees must be able to demonstrate areas of specialist interest by evidence of experience of advanced surgical procedures in their logbooks, especially in the latter years of training.</p>
<p><b>Operative competence</b> - evidence of competence in indicative operative procedures to level 3 or 4 (evidenced by PBAs defined by the specialty)</p>	<p>Trainees should have been exposed to all the Technical Skills and Procedures in the curriculum specified for Intermediate Years (ST3-6 inclusive).</p> <p>Trainees should demonstrate competence in the range of emergency and elective procedures with indicative numbers as follows, where the operations are performed as the primary surgeon or performed with senior assistance (below subject to change per SAC):</p> <p><b><u>Elective</u> competencies:</b>  Dupuytren's contracture surgery <b>24</b>  Lymph node surgery <b>15</b>  Free tissue transfer <b>27</b>  Breast reconstruction <b>40</b>  Aesthetic (performed/assisted) <b>100</b>  Excision skin lesion <b>100</b>  Cleft surgery (performed/assisted) <b>35</b></p> <p><b><u>Emergency</u> competencies:</b>  Zone 1-2 flexor tendon repair <b>30</b>  Microvascular anastomosis <b>35</b>  Burns resuscitation <b>18</b>  Excisional burns surgery <b>60</b>  Hand fracture fixation <b>45</b>  Neurosynthesis <b>50</b>  Lower limb trauma <b>50</b></p>
<p><b>Research</b> - evidence of an understanding of, and participation in, research as defined by the specialty</p>	<p>Trainees must provide evidence of the demonstration of critical appraisal and research skills as evidenced by regular publications, presentations, posters and/or higher degree. There is an expectation of at least one such piece of evidence per training year. Evidence of the completion of a Good Clinical Practice course in Research Governance within 3 years of the award of certification and the completion of a research methodologies course are desirable.</p>

<p><b>Quality Improvement</b> - evidence of an understanding of, and participation in, audit or service improvement as defined by the specialty</p>	<p>Trainees must provide evidence of the completion of one audit per year where the trainee is the principal person responsible for the audit.</p>
<p><b>Medical Education and training</b></p>	<p>Trainees should provide evidence of the demonstration of teaching/education skills. Evidence of this may include teaching on a course; organising a course/conference; a diploma certificate or degree in education. The minimum standard is 'Training the Trainers'.</p>
<p><b>Management and leadership</b></p>	<p>Trainees must be able to demonstrate management skills and team working, e.g. running rotas; sitting on management committees; writing and implementing protocols; improving services.</p> <p>Trainees must provide evidence of leadership skills. Evidence of this may include: setting up and running a course; being a trainee representative regionally or nationally; obtaining a leadership qualification.</p>
<p><b>Additional courses / qualifications - as defined by the specialty</b></p>	<p>Trainees must be able to provide evidence of having successfully completed an ATLS® or APLS course at some point during higher training, which must be CURRENT at the time of application for certification.</p>
<p><b>Educational conferences - as defined by the specialty</b></p>	<p>Training programmes require attendance at over 70% of the regional training days</p>

## 10. HSE National Flexible Training Scheme

The HSE National Flexible Training Scheme for Higher Specialist Trainees is a national scheme managed and funded by the Health Service Executives National Doctors Training and Planning (NDTP) Unit. The scheme provides for a **limited number of supernumerary places** to facilitate doctors at higher specialist training level to continue their training in a flexible manner for a set period of time.

Please see mSurgery for more details and an application form.

## 11. Maternity/Paternity Leave

As Maternity/Paternity Leave also affects the CCST date, you will be required to **inform your Programme Director** and the **College** of your Maternity/Paternity leave start and finish dates when you have them. Trainees must also inform their **employer** as per their HSE contracts.

## 12. Exceptional Leave

You can be granted **3 months' exceptional leave** for **illness/exceptional circumstances**.

The SAC require a letter from you outlining the reasons for the exceptional leave and what you will be doing during this time. A letter from the TPD is also required to confirm their agreement for you to take exceptional leave and confirm your new completion date. Trainees must also inform their employer as per their HSE contracts

### 13. Funding

Funding is available to Trainees via a number of different funding streams. Please see table below for a brief overview of all available funds.

The guidelines and refund forms long with more information can be accessed either at [mSurgery/financial-supports-for-sprs](https://www.hse.ie/eng/staff/leadership-education-development/met/ed/fin/)

Or <https://www.hse.ie/eng/staff/leadership-education-development/met/ed/fin/>

<b>TRAINEE SUPPORT SCHEME</b>	<ul style="list-style-type: none"> <li>▪ €2000 maximum per year per trainee.</li> <li>▪ Funding is not carried over year-on-year.</li> <li>▪ Processed via HSE</li> <li>▪ Available from July 2019</li> <li>▪ Further Information <a href="https://www.hse.ie/eng/staff/leadership-education-development/met/ed/fin/">https://www.hse.ie/eng/staff/leadership-education-development/met/ed/fin/</a></li> </ul>
<b>SPECIALIST TRAINING FUND</b>	<ul style="list-style-type: none"> <li>▪ Run by RCSI on behalf of HSE/NDTP.</li> <li>▪ For training courses/activities, equip, books, expenses.</li> <li>▪ €500 per year per Trainee.</li> <li>▪ Funding is carried over year-on-year e.g. three years unclaimed will give the Trainee €1500 to claim.</li> <li>▪ Further information <a href="https://msurgery.ie/home/specialist-training/financial-support/">https://msurgery.ie/home/specialist-training/financial-support/</a></li> </ul>
<b>CLINICAL COURSES AND EXAMS FUND</b>	<ul style="list-style-type: none"> <li>▪ Run by HSE/NDTP for courses and exams only on the approved list.</li> <li>▪ €450 per claim, no restrictions on how many claims can be submitted per year.</li> <li>▪ Trainees must claim for this fund through the HR Departments in their hospital within six months of attending the exam/course.</li> <li>▪ Further Information <a href="https://msurgery.ie/home/specialist-training/financial-support/">https://msurgery.ie/home/specialist-training/financial-support/</a></li> </ul>

<b>SURGICAL LOUPES FUND</b>	<ul style="list-style-type: none"> <li>▪ Amount available to Trainees dependant on number of claims in the year.</li> <li>▪ The Surgical Loupes application form will be emailed to you as soon as it is available. (March 2020)</li> <li>▪ Trainees must submit application and loupes receipt in order to qualify for funding to their ST Administrator.</li> <li>▪ <a href="https://msurgery.ie/home/specialist-training/financial-support/">https://msurgery.ie/home/specialist-training/financial-support/</a></li> </ul>
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**RCSI pays fees for Trainees for:**

<b>INTERCOLLEGIATE SURGICAL CURRICULUM PROGRAMME (ISCP)</b>	<ul style="list-style-type: none"> <li>▪ Available to ST3-ST8 ( Surgical Specialty Training ).</li> <li>▪ €300 per year.</li> </ul>
<b>STATISTICAL PACKAGE FOR SOCIAL SCIENCES (SPSS Statistics Package)</b>	<ul style="list-style-type: none"> <li>▪ Available to all Trainees on the ST Programme and should support with research.</li> <li>▪ This can be downloaded using your RCSI log on through <a href="https://vle.rcsi.ie/">https://vle.rcsi.ie/</a>, then follow the path: Support → IT Support → 4. RCSI Software Library → SPSS</li> <li>▪ Normal purchase cost €1100 per Trainee.</li> </ul>
<b>ENDNOTE</b>	<ul style="list-style-type: none"> <li>▪ Available to all Trainees on the ST Programme and should help with research.</li> <li>▪ This can be downloaded using your RCSI log on through <a href="https://vle.rcsi.ie/">https://vle.rcsi.ie/</a>, then follow the path: Support → IT Support → 4. RCSI Software Library → Endnote</li> <li>▪ Normal purchase cost €300 per Trainee.</li> </ul>

*\* Please note while it is our intention to meet funding requirements, funding is subject to review and annual approval by the HSE/ NDTP on an annual basis.*

## 14. Research Methodology Course for Surgical Trainees

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The Irish Surgical Postgraduate Training Committee is committed to ensuring that surgical trainees have good exposure to Academic Surgery as an integral part of surgical training.

As a first step, a taught course in research methodology was introduced in 2015. This is a modular programme, which runs over four days in ST3 and ST4 (i.e. two days in each training year). The programme gives a comprehensive introduction to research methodology relevant to surgeons and is delivered in RCSI by Professor Tom Fahy and his team. After ST4, some trainees may opt to take time out of surgical training to pursue an MD or PhD through full time research for two years. However, the taught programme is intended for all surgical trainees, even if they do not plan to pursue an MD or PhD later.

The ISPTC has deemed this programme mandatory for all ST3 trainees in all specialities and you will be required to complete the four modules in order to be “signed off” in your ARCP at the end of ST4. However, those trainees who have already completed a taught MCh, or MD or PhD are exempted from the research methodology course as they have already completed a similar course as part of their higher degree.

Trainees commencing in ST3 will be contacted with details of the course including exemption details.

## 15. Student card/Library

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You will need an **RCSI email** to access journals on the RCSI website, electronic library and also to gain entry to the library. Your student identification **card** may be obtained from the **IT department**, ground floor, RCSI, 121 St. Stephens Green.

## 16. The Irish Surgical Training Group (ISTG)

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The Irish Surgical Training Group is a group of Surgical Trainees who represent all sub-specialty Trainees in Ireland from ST 1-8. The aims of the group are as follows:

- To provide leadership for Surgical Trainees of all disciplines.
- To represent the voices of Surgical Trainees as key stakeholders in planning of surgical training with all training bodies and committees.

- To provide a forum for the discussion of surgical training issues through meetings:
  - Training information evening and AGM: get the inside track on life as senior Trainee on your sub-specialty of interest.
  - Annual meeting of ISTG and Bosco O'Mahoney lecture: part of Charter day meeting: themed meeting on issues affecting surgical Trainees, reports from recent fellowships.
  - Annual Trainee dinner and presentation of Silver Scalpel Award.

The ISTG can provide support and advice to Trainees and can be contacted at [irishsurgicaltraininggroup@gmail.com](mailto:irishsurgicaltraininggroup@gmail.com). It would be a good idea to email this group and request they put you on their mailing list

## 17. RCSI Surgical Fellowships and Awards

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The College is committed to encouraging the acquisition of **additional training and skills** outside the structured programmes of the College and, to this end, provides a range of **scholarships and grants** in postgraduate surgery to assist surgeons-in-training and recently appointed Consultant Surgeons to gain additional expertise in centres of excellence overseas.

Applicants must be Fellows or Members of the Royal College of Surgeons in Ireland who are in good standing. [http://www.rcsi.ie/fellowships\\_and\\_awards](http://www.rcsi.ie/fellowships_and_awards)