

ST3 - ST8
SPECIALIST TRAINING INFORMATION

PLASTIC, RECONSTRUCTIVE & AESTHETIC SURGERY

JUNE 2023

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ROYAL COLLEGE OF SURGEONS IN IRELAND



RCSI

Welcome	3	13. HSE National Flexible Training Scheme	14
1. Meeting with the Training Programme Director	4	14. Maternity Leave/Paternity Leave/Childcare	15
2. Training Units	4	15. Exceptional Leave	15
3. Plastic Surgery Training Committee	4	16. Funding	15
4. Intercollegiate Surgical Curriculum Programme	5	17. Mentor Programme	16
4.1 General Overview of the Intercollegiate Surgical Curriculum Programme	5	18. Library Access	16
4.2 Trainee Registering and Engagement	5	19. The Irish Surgical Training Group (ISTG)	16
4.3 ISCP account Post CSCST	5	20. RCSI Surgical Fellowships and Awards	16
5. Plastic Surgery Training Requirements	6	21. Access your Membership by remaining in Good Standing	17
5.1 Mandatory Technical Courses	6	22. Important Contact Details	17
5.2 Mandatory Teaching Days	6	23. Appendix 1: Plastic Surgery Curriculum	18
5.3 Designated Indicative Core Surgical Procedures	6	24. Appendix 2: Index Procedures	18
5.4 Completed Audits	6	25. Appendix 3: Guide to the LA, MCR, SA	19
5.5 Copies of Published Papers	6	26. Appendix 4: RCSI HST Logbook	37
5.6 Portfolio Cases	7		
5.7 Annual ARCP Presentation	7		
5.8 Consolidated Logbook	7		
5.9 Trainee Portal – Connect SA	7		
6. Human Factors in Patient Safety	8		
7. Research Methodology Course for Surgical Trainees	9		
8. Certificate of Completion of Surgical Training	10		
9. Joint Committee on Surgical Affairs (JCST)	10		
10. JCST Certification Guidelines for Plastic Surgery	11		
11. Out of Programme Training	14		
12. Alternative Flexible Training Arrangements	14		

WELCOME

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 faithfully,

Mr Barry O'Sullivan

Programme Director for Specialty Training in Plastic, Reconstructive & Aesthetic Surgery

IMPORTANT INFORMATION

Specialty Training Administrator for Plastic, Reconstructive & Aesthetic Surgery for ST3-8 Trainees:

Roisin Scally

RCSI Surgical Affairs, Royal College of Surgeons in Ireland

121/122 St. Stephen's Green, Dublin 2, Ireland

Tel: **01 402 2166 / 01 402 5191** E: roisinscally@rcsi.com W: www.rcsi.ie

1. MEETING WITH THE TRAINING PROGRAMME DIRECTOR (if required)

If you have any questions before starting the programme you may wish to meet with the TPD, **Mr Barry O'Sullivan**

If you require a meeting with the TPD during your time on the programme, please contact your Specialty Training Administrator: roisinscally@rcsi.ie, to arrange this.

2. TRAINING UNITS

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.

Beaumont Hospital

Connolly Hospital

This rotation is managed by Beaumont Hospital

Cork University Hospital

University Hospital Galway

Mater Misericordiae University Hospital

Children's University Hospital Temple Street This rotation is managed by the Mater Hospital

St James's Hospital

Our Lady's Children's Hospital Crumlin

This rotation is managed by St James's Hospital

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.

PLASTIC SURGERY COMMITTEE

Programme Director for Specialty Training

Mr Barry O'Sullivan

CST Programme Director for Plastic Surgery

Ms Marlese Dempsey

SAC Representative

Prof Brian Kneafsey

IAPS President

Prof Brian Kneafsey

St James's Hospital Training Representative

Mr Christoph Theopold

Mater Misericordiae University Hospital Training Representative

Mr Robert Caulfield

Cork University Hospital Training Representative

Prof Jim Clover

University Hospital Galway Training Representative

Mr Niall McInerney

St Vincent's University Hospital Training Representative

Ms Roisin Dolan

Beaumont Hospital Training Representative

Mr Nadeem Ajmal

ASSIGNED EDUCATIONAL SUPERVISOR (AES) LIST PER SITE

Cork University Hospital

Prof Jim Clover

University College Hospital Galway

Mr Niall McInerney

Mater Misericordiae University Hospital

Mr Robert Caulfield

St. Vincent's University Hospital

Ms Roisin Dolan

Beaumont Hospital

Mr Nadeem Ajmal

St James's Hospital

Mr Christoph Theopold

- Delivery of the curriculum by surgeons who are appropriately qualified to deliver surgical training.
- A robust assessment system to enable systematic progression through to completion of surgical specialty training.
- Regulation of progression through training by the achievement of outcomes that are specified within the specialty curricula.
- Formulation and delivery of surgical care by surgeons working in a multidisciplinary environment.
- Collaboration with those charged with delivering health services and training at all levels.

Each of the individual Surgical Curriculum are available on <https://www.iscp.ac.uk/iscp/surgical-curriculum-from-august-2021/about-the-surgical-curriculum/>

Lead Clinical Supervisor (LCS)

Upon you commencing your placement in a Unit you will be informed who your AES is from the list above, you will also be assigned a LCS. More information around this will be made available to you when you commence in the unit.

4. INTERCOLLEGIATE SURGICAL CURRICULUM PROGRAMME (ISCP)

4.1 General Overview of the Intercollegiate Surgical Curriculum Programme (ISCP)

The Intercollegiate Surgical Curriculum Programme (ISCP) provides the approved framework for surgical training from ST3 to ST8 through to consultant level.

The curriculum guides and supports training up to Certificate of Completion of Specialist Training (CCST) in a surgical specialty.

The curriculum enables trainees to develop as generalists within their chosen surgical specialty, to be able to deliver an on-call emergency service and to deliver more specialised services to a defined level.

The curriculum was founded on the following key principles, which support the achievement of these aims:

- A common framework across all the specialties within surgery.
- Curriculum standards that conform to the standards specified by the GMC/RCSI.

4.2 Trainee Registering and Engagement

As a Trainee on the Plastic Surgery Programme, you will be required to use ISCP throughout your time in training.

You will need to register with the site (www.iscp.ac.uk) Please do not pay the fee directly RCSI cover this.

The ISCP platform provides a huge amount of information and resources for trainees and we would encourage you to engage with these prior to starting in your rotation. Reference guides and videos can be located [HERE](#)

4.3 ISCP account Post CSCST

Upon successful completion of training you can contact the ISCP helpdesk to change your user type to consultant. This means that your training records are merely hidden. Your user type can be transferred back to trainee, if you require access your training account/data. Please note that RCSI so not hold a copy of your training record.

5. PLASTIC SURGERY TRAINING REQUIREMENTS

5.1 Mandatory Technical Courses

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.

5.2 Mandatory Teaching Days

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.

5.3 Designated Indicative Core Surgical Procedures

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.

SCP helpdesk to change your user type to consultant. This means that your training records are merely hidden. Your user type can be transferred back to trainee, if you require access your training account/data. Please note that RCSI so not hold a copy of your training record.

5.4 Completed Audits

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

5.5 Copies of Published Papers

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

5.6 Portfolio Cases

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.

5.7 Annual ARCP Presentation

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/>

5.8 Consolidated 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.

A reporting function is available on the logbook for your

ARCP (Print ISCP Report), here you will select the date range and export your logbook for upload to ISCP in advance of your meeting. The steps to complete this can be found in appendix 3.

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 log procedures on the RCSI logbook. Any queries regarding accessing the platform please contact your specialty administrator.

The 3 appendices with your guide are:

1. Curriculum
2. MCR Report
3. ARCP Logbook Report

5.9 Trainee Portal – Connect SA

When you log into your trainee portal using your RCSI credentials you will see all your rotations displayed. You can sign up for your classes, mandatory workshops, Human Factors etc. You can also upload specific documentation related to your Training journey as a document library is available specifically for all trainees.

6. HUMAN FACTORS IN PATIENT SAFETY (HFPS)

PLASTIC, RECONSTRUCTIVE & AESTHETIC SURGERY TRAINING PROGRAMME FOR HFPS 2023-2024	
SpR Year ST3- ST8	Plastic Surgery Bespoke Simulation Day
Workshops: One per year. Classroom based learning	<ul style="list-style-type: none"> • 21st Century Professionalism (ST3) • Safety Management Systems (ST4) • Advanced Communication: Advocacy and Negotiation (ST5) • Leadership (Emotional Intelligence) (ST6)
SpR Year 7/8 Cycle 1	<ul style="list-style-type: none"> • Train the Trainer • Expert performance Cycle 2 • Healthcare Management: • Preparation for Consultant Practice • Presentation and Interview skills

The HFPS programme is a mandatory component of training. All Specialty Trainees are expected to attend their mandatory identified programme of HFPS Simulation and Workshops throughout their training in years ST3 to ST8, as mapped out above. Trainees should maintain their certificate of attendance for each module attended throughout the programme, this is sent the day after the course is attended to your RCSI email address and should be uploaded to ISCP. Failure to do so could lead to difficulties in your sign off for CSCST in ST8.

The Human Factors in Patient Safety programme provides a greater awareness of risk and error in the workplace by providing trainees with skills required to mitigate risk and prevent adverse outcomes. The programme supports the professional development of trainees and seeks to reinforce and ensure a culture of patient safety for the benefit of hospital patients. The RCSI Human Factors in Patient Safety programme also has a unique focus on non-technical skills, such as

communication, teamwork, decision-making, leadership and managing stress emphasising how these skills are facilitate better performance and enhanced self-care.

Training sessions use a combination of interactive classroom-based and experiential teaching methods. Classes are kept to a maximum of 25 attendees or less to allow for role-play, high fidelity simulation and repeated skills practice. Emergency Medicine, Ophthalmology, Radiology and Surgical trainees attend sessions together at Senior House Officer and Registrar level which stimulates multidisciplinary communication and reflection on clinical practice. Sessions are facilitated by a Human Behaviour specialist and a consultant in Surgery, Emergency Medicine, Radiology and Ophthalmology where appropriate.. Each trainee must attend all mandatory components of training which have been tailored to their training level and their specialty.

The curriculum is mapped to a taxonomy of professional outcomes which have been categorised into **eight pillars**.

PILLARS OF PROFESSIONAL OUTCOMES

Attitudes, Behaviours and Performance

Cognition and Problem Solving

Professionalism

Safety Management Systems

Communication

Team work

There are a limited number of places on each course date, places will be allocated on a first- come, first-served basis, once these are filled, that date is no longer available and you must select another date. All classes will take place in RCSI in Dublin.

It is your responsibility to ensure you have selected a date for each module. Once you select your dates on School for Surgeons, please ensure you save it before moving on to select the next module dates.

When selecting your dates you should check with your colleagues that you are not attending the same date. It is important that you notify your Medical Manpower Manager and Consultant Trainers to the dates you have agreed to attend well in advance.

Should you have any queries in relation to your classes please contact the relevant administrator: **Operative Surgical Skills** - email oss@rcsi.ie / **Human Factors in Patient Safety** - humanfactors@rcsi.ie

7. RESEARCH METHODOLOGY COURSE FOR SURGICAL TRAINEES

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 . 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 4 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.

A copy of the Research Methodology exemption form can be downloaded from m-surgery link: <https://msurgery.ie/home/specialist-training/financial-support/>

The dates for the Research Methodology modules Are usually scheduled as follows

Module 1: October

Module 3: November

Module 2: February

Module 4: April

These classes are being run online via Moodle.

8. CERTIFICATE OF COMPLETION OF SURGICAL TRAINING (CCST)

All Trainees must have completed and passed the Fellowship of the Royal College of Surgeons (FRCS) along with reaching all their required training competencies before they can be signed off for Certificate of Completion of Surgical Training (CCST).

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

SAC checklist

ARCPs covering the whole of your training

Signed offer letter

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.

9. JOINT COMMITTEE ON SURGICAL TRAINING (JCST)

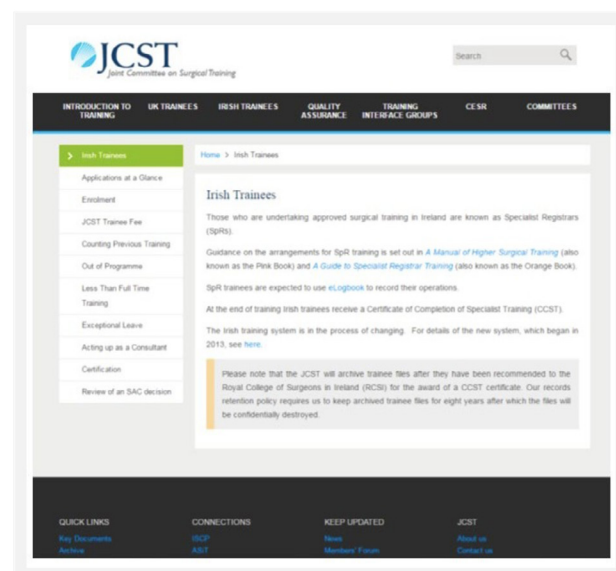
The JCST is an advisory body to the four surgical Royal Colleges of the UK and Ireland for all matters related to surgical training and works closely with the Surgical Specialty Associations in Great Britain and Ireland.

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

Please contact the **CST Administrator**, in relation to this 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>



10. JCST CERTIFICATION GUIDELINES FOR PLASTIC SURGERY

All trainees seeking certification in Plastic Surgery must:

1. Be fully registered with the GMC/IMC and have a licence to practise.
2. Have completed a recognised higher surgical training programme in the UK or Republic of Ireland.
3. Have successfully passed the Intercollegiate Specialty Board examination.
4. 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:

CLINICAL EXPERIENCE - evidence of the breadth of clinical experience defined in the specialty syllabus

Trainees must have experienced six years of progressive training rotating through posts in a minimum of two centres.

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.

Trainees must have been trained in subspecialty clinics across the range of Plastic Surgery (headings considered as fundamental or essential are in bold lettering):

Cutaneous plastic surgery: skin cancer, benign lesions, vascular malformations, laser surgery.

Hand surgery: congenital, elective, trauma/emergency, rehabilitation.

Head and neck surgery: cancer, facial palsy, facial skeletal trauma*

Soft tissue reconstruction: (*a basic working knowledge of this area is required).

Breast surgery: aesthetic, reconstruction.

Paediatric plastic surgery: general, cleft lip and palate, cranio-facial, hypospadias.

Burns: acute management / intensive care, reconstruction.

Sarcoma:

Oculoplastic: aesthetic, reconstructive.

Aesthetic/Cosmetic: Facial and other rejuvenation procedures, body contouring procedure, surgery for massive weight loss, non-surgical procedures.

Lower limb trauma: acute management, reconstruction, rehabilitation.

Genito-urinary reconstruction: BXO, penile cancer, gender re-assignment (and ancillary procedures), vulval/perineal reconstruction.

Microsurgery: e.g. revascularisation, replants, free tissue transfers.

OPERATIVE EXPERIENCE

Consolidated logbook evidence of the breadth of operative experience defined in the specialty syllabus

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.

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.

OPERATIVE COMPETENCE

Evidence of competence in indicative operative procedures to level 3 or 4 (evidenced by PBAs defined by the specialty)

Trainees should have been exposed to all the Technical Skills and Procedures in the curriculum specified for Intermediate Years (ST3-6 inclusive).

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):

Elective competencies:

- Dupuytren's contracture surgery 24
- Lymph node surgery 15
- Free tissue transfer 27
- Breast reconstruction 40
- Aesthetic (performed/assisted) 100
- Excision skin lesion 100
- Cleft surgery (performed/assisted) 35

Emergency competencies:

- Zone 1-2 flexor tendon repair 30
- Microvascular anastomosis 35
- Burns resuscitation 18
- Excisional burns surgery 60
- Hand fracture fixation 45
- Neurosynthesis 50
- Lower limb trauma 50

QUALITY IMPROVEMENT

Evidence of an understanding of, and participation in, audit or service improvement as defined by the specialty

Trainees must provide evidence of the completion of one audit per year where the trainee is the principal person responsible for the audit.

MEDICAL EDUCATION AND TRAINING

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'.

**MANAGEMENT
AND LEADERSHIP**

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.

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.

**ADDITIONAL
COURSES /
QUALIFICATIONS**
- As defined by the
specialty

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.

**EDUCATIONAL
CONFERENCES -**
As defined by the
specialty

Training programmes require attendance at over 70% of the regional training days

11. OUT-OF-PROGRAMME TRAINING

If deemed appropriate by the Training Committee, you can apply for time out of programme on, to count towards training. To go on OOP training you will need to:

- ~ Discuss your intention with your Training Programme Director (TPD) and gain their support. **You must give 12 months' notice of your intention to go on OOPT.**
- ~ Once you have the support of your TPD, you will need to make an initial application to your SAC for prospective support. Your RCSI administrator will advise you on the application and submit it to the SAC.

There are restrictions on the amount of OOPT you can count towards training i.e. across the whole of your training a maximum of 12 months OOPT can be counted towards training, and you cannot get retrospection and OOPT, in Ireland. The SAC must prospectively approve any OOPT activity if you intend it to count towards certification.

Out of programme training application checklist	
Up-to-date CV	
Signed offer letter	
Letter of support from Training Programme Director showing exact dates of your fellowship/OOPT period and whether the time is counting towards training	
Confirmation that Deanery are aware of Out of Programme Training	
Educational contract signed by you and your Fellowship Supervisor, which includes details of Learning Agreements and Objectives and your Timetable	
Job description	
Name and contact details of your Fellowship Supervisor	
Logbooks from two previous incumbents of the post or a report from the Supervisor on the expected number of operations	

OOPT links on JCST website:

<https://www.jcst.org/irish-trainees/out-of-programme/>

12. ALTERNATIVE FLEXIBLE TRAINING ARRANGEMENTS

Trainees wishing to avail of flexible training options out with of the HSE supernumerary offering should discuss options with their Training Programme Director and Hospital MMM.

Other alternatives can be explored for e.g. a 4 day week, week on week off in line with both your training requirements and those of the hospital you work in.

Trainees can also avail of job-sharing opportunities for a set period of time. Job-sharing works on the basis that **two Trainees will share one full-time post** with each Trainee working 50% of the hours.

The aim of any approach to flexible training is to retain doctors within the medical workforce who are unable to continue train on a full-time basis.

It is important to note that any flexible training option approved will result in an extension to your CCST date.

Please see **mSurgery** Link:

~ www.msurgery.ie

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## 13. 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.

The guide sets out the current details of the National Flexible Training Scheme and provides information for Trainees about the programme and the application process. Applications generally open at the beginning of August and close at the end of December for the training year commencing the following July.

Please see **mSurgery** Link:

~ [www.msurgery.ie](http://www.msurgery.ie)



#### 14. MATERNITY/PATERNITY LEAVE/ CHILDCARE

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.

##### Childcare

RCSI provides a subsidy and has an agreement in place Giraffe Crèches (at its Dublin sites) for a limited number of childcare places for children of RCSI staff and registered full-time students in the Schools of Medicine (including Physician Associates programme), Physiotherapy, Pharmacy and School of Postgraduate Studies students studying full-time on a Research programme i.e. MCh by Research, MSc by Research, MD and PhD. Please note this offer does not extend to

Postgraduate Surgical or Emergency Medicine Trainees who are not in full time education in RCSI.

#### 15. EXCEPTIONAL LEAVE

Trainees can be granted three months exceptional leave for illness/exceptional circumstances.

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

#### 16. FUNDING

Funding is available to Trainees via a number of different funding streams. Please see table below for a brief overview of all funds. The guidelines and refund forms for all the mandatory, specialist, surgical loupes and clinical courses and examination funds are located on the MSurgery website.

##### SPECIALIST TRAINING FUND

- ~ Run by RCSI on behalf of HSE/NDTP.
- ~ For training courses/activities, equip, books, expenses.
- ~ €500 per year per Trainee.
- ~ Funding will be carried over year-on-year e.g., three years unclaimed will give the Trainee €1500 to claim.

##### CLINICAL COURSES AND EXAMS FUND

- ~ Run by HSE/NDTP for courses and exams only on the approved list.
- ~ €450 per claim, no restrictions on how many claims you may submit per year.
- ~ Trainees must claim for this fund through the HR Departments in their hospital within six months of attending the exam/course.

##### SURGICAL LOUPES FUND

- ~ Amount available to Trainees dependant on number of claims.
- ~ The Surgical Loupes application form will be emailed to you as soon as it is available, usually in March.
- ~ Trainees must submit application and loupes receipt in order to qualify for funding to their ST Administrator.

### RCSI pays fees for Trainees for:

#### INTERCOLLEGIATE SURGICAL CURRICULUM PROGRAMME (ISCP)

- ~ Available to ST3-ST8 (dependant on Specialty).
- ~ €300 per year.

#### ENDNOTE

- ~ Available to all Trainees on the ST Programme and should help with research.
- ~ This can be downloaded using your RCSI log on through <https://vle.rcsi.com/course/view.php?id=693&section=4>
- ~ Normal purchase cost €300 per Trainee.

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.

### 17. MENTOR PROGRAMME

The RCSI is committed to supporting Trainees at all stages of training and has created a structured Mentoring Programme which is available to Higher Specialist Trainees.

Mentoring allows trainees develop strong connections and get advice and direction on the challenges that all those embarking on Surgical Training experience.

Ms Roisin Dolan oversees the Plastic Surgery Mentor Programme and reports to the Training Committee on issues that may arise.

Your mentor from July 2023 will be Ms Christine Quinlan. She will be your mentor for the duration of your training. You should arrange a meeting with her in the early stages of your ST3 rotation.

### 18. LIBRARY ACCESS

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.

### 19. THE IRISH SURGICAL TRAINING GROUP (ISTG)

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

### 20. RCSI SURGICAL FELLOWSHIPS AND AWARDS

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)



## **21. ACCESS YOUR RCSI MEMBERSHIP BY REMAINING IN GOOD STANDING**

As you commence your new HST year, a reminder that RCSI Membership subscription year runs from 1 May to end of April. As a Higher Surgical Trainee and RCSI Member, it is important that you remain in Good Standing with the College by paying your annual subscription.

By supporting the College in this way, you remain part of a global network of over 11,000 Fellows and Members in 89 countries worldwide, giving you competitive advantage internationally through verification of your award and use of your post-nominals.

Membership also gives you other opportunities, including a dedicated Fellows and Members portal with access to e-journals and online resources such as The Surgeon, Annals of Surgery, Elsevier journal, Lib Guides and surgical skills guides, institutional repositories and a wealth of information through our Library services along with career opportunities through Fellowship, award and bursary opportunities, mentorship, specialty webinars, CPD opportunities and career development advice.

To avail of the benefits of being one of our Higher Surgical Trainees, we strongly encourage you to remain in Good Standing – you can check the status of your RCSI membership and pay your subscription [HERE](#)

We are grateful to all RCSI Fellows and Members who continue to pay their annual subscription and support the College and future generations of Surgeons. The Fellows and Members office are the office with responsibility for supporting the professional surgical network internationally. You can contact them at [fellows@rcsi.ie](mailto:fellows@rcsi.ie)

## **22. IMPORTANT CONTACT DETAILS**

**Training Programme Director**  
**Mr Barry O'Sullivan**  
E: [barryosullivan@rcsi.com](mailto:barryosullivan@rcsi.com)

**Surgical Training Office**  
1st Floor 121 St. Stephens Green

**Specialty Training Administrator for Plastic Surgery**  
**Roisin Scally**  
E: [roisinscally@rcsi.ie](mailto:roisinscally@rcsi.ie)  
T: 01 402 2166 / 01 402 5191

**Intercollegiate Surgical Curriculum Programme (ISCP)**  
**Helpdesk** Opening Times are:  
Monday to Friday, 09.00 am – 17.00 pm  
T: 0044 20 7869 6299  
E: [helpdesk@iscp.ac.uk](mailto:helpdesk@iscp.ac.uk) W: [www.iscp.ac.uk](http://www.iscp.ac.uk)

**Joint Committee on Surgical Training**  
34-35 Lincoln's Inn Fields, London, WC2A 3PE, England  
[www.jcst.org](http://www.jcst.org)  
**Specialty Manager**  
T: 0044 020 7869 6256

**RCSI Reception**  
121 Stephens Green, Dublin 2  
T: 01 402 2422 T: 01 402 2263

**RCSI IT Department**  
Ground Floor, RCSI House, 121 St Stephens Green, Dublin 2  
T: 01 402 2273 E: [helpdesk@rcsi.ie](mailto:helpdesk@rcsi.ie)

**RCSI Library**  
T: 01 402 2409 E: [librarysec@rcsi.ie](mailto:librarysec@rcsi.ie)  
W: [www.rcsi.ie/library](http://www.rcsi.ie/library)

**RCSI Student Academic and Regulatory Affairs Office (SARA)**  
1st Floor, 123 St Stephens Green, Dublin 2  
T: 01 402 2222 E: [ssgsara@rcsi.ie](mailto:ssgsara@rcsi.ie)

## APPENDICES

### APPENDIX 1: PLASTIC SURGERY CURRICULUM

Plastic Surgery manages a large number of individual conditions as described in the syllabus. Assessment of a trainee's ability to manage these is through the supervision level decisions made when assessing the shared and specialty-specific CiPs. Plastic Surgery also has a list of critical conditions which are felt to be of significant importance for patient safety and to demonstrate a safe breadth of practice.

To ensure that trainees have the necessary skills, these critical conditions will be assessed individually by means of the Case Based Assessment (CBD) and Clinical Evaluation Exercise (CEX) (as appropriate) to level 4: Appropriate for certification

The CBD/CEX will both provide formative feedback to the trainee and feed into the summative assessment of the AES (the AES report) for the ARCP.

#### General

- Burns assessment and emergency management
- Necrotising fasciitis and other severe soft tissue infections
- Emergency management of complex trauma to the lower limb, including open fractures and major degloving injuries
- Emergency management of complex trauma to the upper limb including replantation and revascularisation
- Compartment syndrome
- Emergency management of post-operative complications including microvascular salvage

2

### APPENDIX 2: INDEX PROCEDURES

The curriculum requires technical skills to be achieved across a wide range of operative procedures as described in the syllabus. Assessment of a trainee's ability to carry out this full range of procedures is covered by the supervision level decisions made when assessing the shared and specialty-specific CiPs. These assess not only the necessary technical skills, but the totality of capabilities required to carry them out.

Plastic Surgery also has a list of index procedures, which are felt to be of significant importance for patient safety and to demonstrate a safe breadth of practice. These index procedures will be assessed individually by means of the Procedure Based Assessment (PBA). By the end of phase 3, there should be evidence that an indicative number of three or more operations in each procedure group has been assessed and recorded at the level of a day-one consultant (level 4 PBA). The PBA will both provide formative feedback to the trainee and feed into the summative assessment of the AES (the AES report for the ARCP).

#### Elective procedures:

- a. Dupuytren's contracture surgery
- b. Lymph node basin dissection
- c. Cleft surgery
- d. Free tissue transfer
- e. Aesthetic surgery
- f. Breast reconstruction
- g. Excision skin lesion and flap/graft reconstruction

#### Emergency procedures:

- Zone 1-2 flexor tendon repair
- Hand fracture fixation
- Nerve repair (except brachial plexus)
- Burns resuscitation
- Burns - excisional or emergency operations
- Microvascular anastomoses
- Lower limb trauma procedures

#### PBA Level 4:

- a: Procedure performed fluently without guidance or intervention
- b: As 4a and was able to anticipate, avoid and/or deal with common problems/complications

### APPENDIX 3: COMPLETE STEP GUIDE TO THE LA-MCR-SA

#### PLACEMENT START

| STEP 1 10 minutes |                                                                                                                                                                                                |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Trainee           | <b>Set up placement</b> <ul style="list-style-type: none"> <li>~ Transition to new curriculum</li> <li>~ List AES</li> <li>~ List all CSs + AES (min 2)</li> <li>~ Submit placement</li> </ul> |

| STEP 2 5 minutes |                                                                                                         |
|------------------|---------------------------------------------------------------------------------------------------------|
| Trainee          | <ul style="list-style-type: none"> <li>~ Create Learning Agreement</li> <li>~ Select Lead CS</li> </ul> |

#### LA - OBJECTIVE SETTING

| STEP 3 30 minutes |                                                                                                                                                                                            |
|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Trainee           | <b>Complete objective setting with AES</b> <ul style="list-style-type: none"> <li>~ Objectives for GPCs / each CiP</li> <li>~ Support to achieve objectives</li> <li>~ Sign off</li> </ul> |

| STEP 3 30 minutes per trainee   |                                                                                                                                                                                                |
|---------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Assigned Educational Supervisor | <b>Complete objective setting with trainee</b> <ul style="list-style-type: none"> <li>~ Objectives for GPCs / each CiP</li> <li>~ Support to achieve objectives</li> <li>~ Sign off</li> </ul> |

| STEP 4 15 minutes |                                          |
|-------------------|------------------------------------------|
| Trainee           | <b>Complete midpoint Self-Assessment</b> |

| STEP 4 10 minutes per trainee |                                                                                                                                                                                                              |
|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Lead Clinical Supervisor      | <b>Complete midpoint MCR (Arrange MCR meeting in advance)</b> <ul style="list-style-type: none"> <li>~ Access MCR via dashboard link</li> <li>~ Complete MCR on behalf of group</li> <li>~ Submit</li> </ul> |

| STEP 4 10 minutes per trainee |                                                                                                     |
|-------------------------------|-----------------------------------------------------------------------------------------------------|
| Other Clinical Supervisors    | <b>Complete midpoint MCR</b> <ul style="list-style-type: none"> <li>~ Attend MCR meeting</li> </ul> |

| STEP 5 10 minutes per trainee |                                                                                                                                        |
|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Other Clinical Supervisors    | <b>Agree MCR</b> (even if present at meeting) <ul style="list-style-type: none"> <li>~ Option to agree/disagree and comment</li> </ul> |

| STEP 6 10 minutes per trainee   |                                                                                                                                                                                                                                              |
|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Assigned Educational Supervisor | <b>Sign off midpoint MCR</b> (After step 5 or 2 weeks after step 4) <ul style="list-style-type: none"> <li>~ Access MCR via dashboard link</li> <li>~ Add global comments</li> <li>~ Add progress in GPCs 6-9</li> <li>~ Sign off</li> </ul> |

| STEP 7 30 minutes per trainee |                                                                                            |
|-------------------------------|--------------------------------------------------------------------------------------------|
| Lead Clinical Supervisor      | <b>Arrange a feedback session with the trainee to discuss the MCR and self-assessment.</b> |

#### LA - MIDPOINT REVIEW

| STEP 8 30 minutes |                                                                                                                                                                                        |
|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Trainee           | <b>Complete midpoint review with AES</b> <ul style="list-style-type: none"> <li>~ Review progress in GPCs / CiPs</li> <li>~ Agree any actions necessary</li> <li>~ Sign off</li> </ul> |

| STEP 8 30 minutes               |                                                                                                                                                                                            |
|---------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Assigned Educational Supervisor | <b>Complete midpoint review with trainee</b> <ul style="list-style-type: none"> <li>~ Review progress in GPCs / CiPs</li> <li>~ Agree any actions necessary</li> <li>~ Sign off</li> </ul> |

## LA – MIDPOINT REVIEW

| STEP 9 15 minutes              |                                                                                                                                            |
|--------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Trainee                        | Complete final Self-Assessment                                                                                                             |
| STEP 9 10 minutes per trainee  |                                                                                                                                            |
| Lead Clinical Supervisor       | Complete final MCR<br>(Arrange MCR meeting in advance)<br>~ Access MCR via dashboard link<br>~ Complete MCR on behalf of group<br>~ Submit |
| STEP 9 10 minutes per trainee  |                                                                                                                                            |
| Other Clinical Supervisors     | Complete final MCR<br>~ Attend MCR meeting                                                                                                 |
| STEP 10 10 minutes per trainee |                                                                                                                                            |
| Other Clinical Supervisors     | Agree MCR<br>(even if present at meeting)<br>~ Option to agree/disagree and comment                                                        |

| STEP 11 10 minutes per trainee  |                                                                                                                                                                      |
|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Assigned Educational Supervisor | Sign off final MCR<br>(After step 5 or 2 weeks after step 4)<br>~ Access MCR via dashboard link<br>~ Add global comments<br>~ Add progress in GPCs 6-9<br>~ Sign off |

| STEP 12 30 minutes per trainee |                                                                                     |
|--------------------------------|-------------------------------------------------------------------------------------|
| Lead Clinical Supervisor       | Arrange a feedback session with the trainee to discuss the MCR and self-assessment. |

## LA – FINAL REVIEW

| STEP 13 30 minutes |                                                                                  |
|--------------------|----------------------------------------------------------------------------------|
| Trainee            | Complete final review with AES<br>~ Review progress in GPCs / CiPs<br>~ Sign off |

| STEP 13 30 minutes per trainee |                                                                                                            |
|--------------------------------|------------------------------------------------------------------------------------------------------------|
| Trainee                        | Complete final review with trainee<br>~ Review progress in GPCs / CiPs<br>~ Write AES report<br>~ Sign off |

## PLACEMENT ENDS



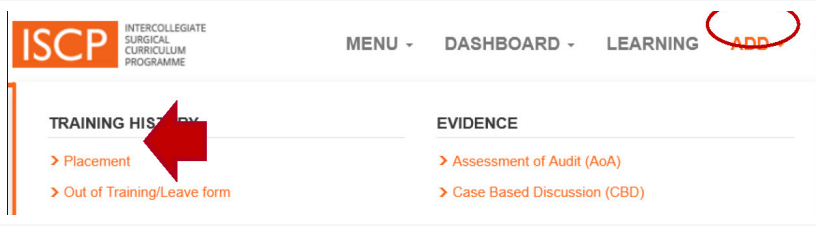
### 3A. TRAINEE SCREEN NAVIGATION

#### STEP 1

##### Set up placement

From the menu click ADD / Placement

Select the lefthand YES box to transition to the new curriculum



ISCP INTERCOLLEGIATE SURGICAL CURRICULUM PROGRAMME

MENU ▾ DASHBOARD ▾ LEARNING **ADD**

**TRAINING HISTORY**

- > Placement
- > Out of Training/Leave form

**EVIDENCE**

- > Assessment of Audit (AoA)
- > Case Based Discussion (CBD)

---

Choose your curriculum for this placement

**Are you transferring to the new curriculum?**

You should TRANSFER if you are:

- Entering Core Surgical Training (CT1) or Run-through training (ST1)
- Entering ST2 in Neurosurgery
- Entering specialty training at ST3
- Entering a new training level

You can REMAIN on the previous curriculum if you are:

- Entering CT2, or ST2 in any specialty other than Neurosurgery
- Entering the final level of specialty training (ST7 in OMFS or Urology or ST8)
- Staying at your current level (e.g. if you are less than full time) until you enter the next training level

Trainees who can remain on the current curriculum but wish to transfer to the new curriculum should first discuss arrangements with their Training Programme Director.

[More information](#) [Cancel](#)

---

**In all cases, from 2<sup>nd</sup> August 2023 all trainees must be on the 2021 curriculum**

YES - I am eligible to transfer to the new 2021 curriculum now and will do so at the start of my next placement after August 2021

NO - I am permitted to remain on the previous version of the curriculum at this time

**RCSI PLASTIC, RECONSTRUCTIVE & AESTHETIC SURGERY**  
ST3 - ST8 Specialist Training Information

Complete the placement form.

### Your key training details

Please ensure the following details are correct before continuing. All mandatory fields are **highlighted like this**

|                          |                                                  |
|--------------------------|--------------------------------------------------|
| Trainee                  | Bussey, Maria Demo Trainee (Dr) [GMC: 111111111] |
| <b>Appointment type</b>  | Please select                                    |
| <b>Parent Specialty</b>  | Please select                                    |
| <b>Academic trainee?</b> | Please select                                    |
| <b>Military trainee?</b> | No                                               |
| <b>Deanery/LETB</b>      | Health Education Wessex                          |
| <b>TPD</b>               | Please select a Deanery/LETB and specialty       |

### Placement details

|                               |                                    |
|-------------------------------|------------------------------------|
| <b>Hospital</b>               | Start typing to find your hospital |
| <b>Start date</b>             |                                    |
| <b>End date</b>               |                                    |
| <b>Full time trainee?</b>     | Please select                      |
| <b>Specialty of placement</b> | Please select                      |
| <b>Level</b>                  | Please select                      |

### Supervisors for this placement

|            |                               |
|------------|-------------------------------|
| <b>AES</b> | Start typing to find your AES |
| <b>CS</b>  | Start typing to add your CS   |

### Saving and validating this placement

#### Agreement

I, Bussey, Maria Demo Trainee (Dr) [GMC: 111111111], agree & confirm:

1. That by submitting this placement form to the selected Training Programme Director,

☐ I am consenting to grant access to my ISCP portfolio to the following registered users (including those who may be based overseas where relevant)

Training Programme Director TPD, Demo

Assigned Educational Supervisor

Clinical Supervisors

Pertaining to the parent specialty selected:

- Any Delegated Training Programme Director allocated by my Training Programme Director
- Specialty Advisory Committee Chair and Liaison member(s) for the parent specialty recorded in this placement

Pertaining to the Deanery/LETB/region selected:

- Head(s) of School
- Postgraduate Dean(s)
- ARCP Panel members
- Deanery/LETB Administrators

Pertaining to the hospital / trust selected:

- Surgical Tutor
- Educational Manager

2. To the statement of Health and Probity

☐ Statement of Health and Probity

3. To the Educational Contract

☐ Educational Contract

Submit this Placement

No - Save as draft

No - Save as draft

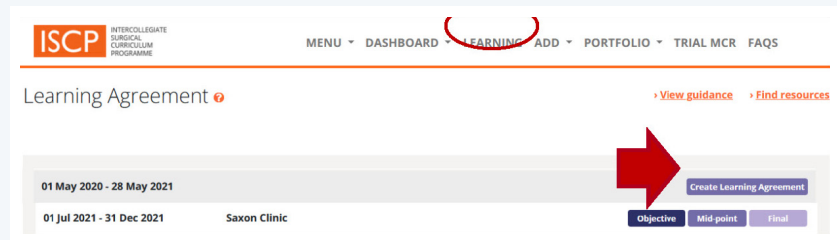
Yes - I would like to submit now

Save As Draft

## STEP 2

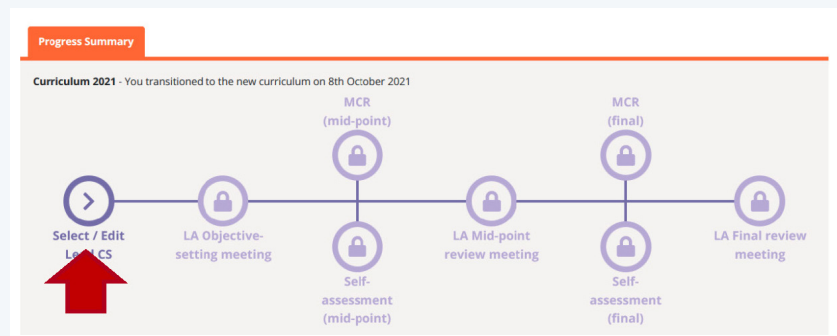
### Create the Learning Agreement

Click on **LEARNING** in the menu /  
Click **Create Learning Agreement**



### Select Lead Clinical Supervisor

Click the marble – **Select / Edit Lead CS**

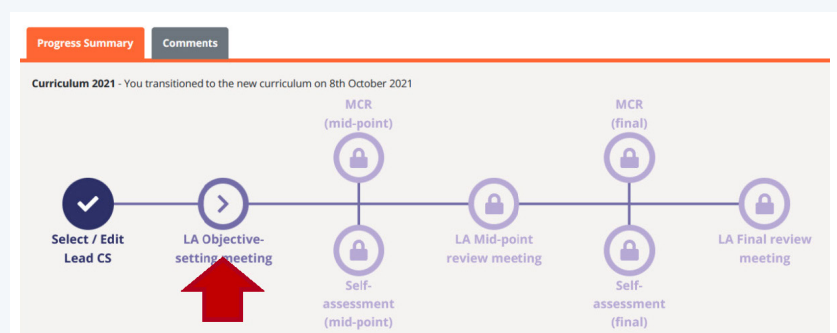


Select the radio button next to the name and click the green **Save Lead Clinical Supervisor button**. You can change the Lead CS in the same way at any time.

## STEP 3

### Complete the objective setting meeting with AES

Click the **LA Objective-setting meeting** marble.



Enter the date on the cover page and click the green **Save and continue** button.

### Set objectives for the GPCs.

Previous MCRs will display (except for the first objective setting meeting following transition to the new curriculum).

Use the drop down box select a view of the GPCs as rated in the MCR. You can use these as a reference for setting new objectives.

Agree with your AES, set objectives in the first box. You can click the plus signs next to MCR descriptors to add them to the objectives box.

Agree with your AES the support you will need to achieve the objectives. This might include workplace-based assessment, courses, learning opportunities.

Click the green **Save and continue** button when finished.

**Do the same with each of the CiPs.**



Objectives may cover knowledge, clinical skills, decision-making, operative skills, index procedures/PBAs, critical conditions/CEX/CBDs, exams, courses and projects as relevant to each CiP.

**Learning Agreement** [View guidance](#) [Find resources](#)

Objective-setting meeting | Meeting date | Objectives and Actions | Summary | Sign-off | **Progress summary**

GP1 CIP 1 CIP 2 CIP 3 CIP 4 CIP 5

**View MCR and Self-assessment CIP 1 - Manages an out-patient clinic**

**MCR (most recent feedback)**

Created 8th October 2021 by Mrs Bussey Clinical Supervisor 1 (GMC: 44444444) Saxon Clinic

Supervision level III

Areas for development

Assesses and prioritises GP and inter-departmental referrals and deals correctly with inappropriate referrals

Areas of excellence

**Self-assessment (most recent feedback)**

Created 8th October 2021 by Saxon Clinic

Supervision level IV

Areas for development

No areas for development highlighted.

Areas of excellence

No areas of excellence highlighted.

**Objectives and actions**

Objective-setting | Mid-point review | Final review

Add the objectives that the trainee should aim to meet over the next 3-6 months to aid their development (including certification requirements).

Add details about the support that will be provided to help the trainee achieve these objectives.

GP1 Save and continue

Check the Summary page and then the **Sign-off** page.

**Learning Agreement** [View guidance](#) [Find resources](#)

Objective-setting meeting | Meeting date | Objectives and Actions | **Summary** | Sign-off | **Progress summary**

**Trainee comments**

No additional comments

NOTE: any comments saved as draft will be immediately viewable by the AES

**AES comments**

No additional comments

**Saving and signing-off this meeting**

Sign-off Please select

Summary Save as draft

#### STEP 4

#### Complete midpoint Self-Assessment

From the menu, click **LEARNING** /  
Click on the purpose **Mid-point** tab  
next to the relevant placement.

Click on the **Self-assessment (mid-point)** marble. Hovering on the marbles provides more information on the status of each stage.



#### Complete the Self-Assessment form.

Rate GPC domains 1-9. The default rating is **Appropriate for phase**. Use free text to explain specific achievements. Alternatively, select **Area for development** which requires explanatory commentary. Use free text or browse descriptors to describe any development needs. Click the green **Save and continue** button at the bottom to continue to the CiPs.

Self-assessment (mid-point) [View guidance](#) [Find resources](#)

**NOTE:**

- Use the buttons to rate each GPC as 'Appropriate for phase' (default) or 'Areas for development'.
- Where you have indicated 'Areas for development', select descriptors and/or add free text to describe the developments required.

Generic Professional Capabilities

**GPC 1 - Professional values and behaviours**

Appropriate for phase  
Area for development

Your comments...

Select descriptors

**GPC 2 - Professional skills**

Appropriate for phase  
Area for development

Please add your reasons for selecting this domain as an area for development  
AND/OR select the specific descriptor which is the area for development

Your comments...

Select descriptors

Do the same for each CiP, using free text or descriptors (maximum 5) to explain any ratings lower than **IV**. Excellence ratings can also be selected.

Self-assessment (mid-point) [View guidance](#) [Find resources](#)

**NOTE:**

- Use the buttons to select the supervision level.
- Where the supervision level is less than IV, select descriptors (maximum 5) and/or add free text to describe the developments required.

Capabilities in Practice

**CIP 1 - Manages an out-patient clinic**

**SUPERVISION LEVEL**  
III

If supervision level is I to III, please add a comment  
AND/OR select a descriptor from the Capabilities in practice box

Your comments...

Select descriptors

**CIP 2 - Manages the unselected emergency take**

**SUPERVISION LEVEL**  
IV

Your comments...

Select descriptors

Check the resulting summary and then click the green **Submit Self-assessment** button.

Self-assessment (mid-point) [View guidance](#) [Find resources](#)

[Print](#) [Progress Summary](#)

Generic Professional Capabilities [Submit Self-assessment](#)

|                                               |                                                                         |
|-----------------------------------------------|-------------------------------------------------------------------------|
| <b>1 - Professional values and behaviours</b> |                                                                         |
| Areas for development                         | No areas for development highlighted. Trainee is appropriate for phase. |
| Comments                                      | No comments                                                             |
| <b>2 - Professional skills</b>                |                                                                         |
| Areas for development                         | No areas for development highlighted. Trainee is appropriate for phase. |
| Comments                                      | No comments                                                             |

When the MCRs are available for you to view, you will receive this alert on your dashboard:

**The MCR (mid-point) has now been signed off by [AES NAME GMC NUMBER] and can be found in your portfolio.**

**The MCR (final) has now been signed off by [AES NAME GMC NUMBER] and can be found in your portfolio.**

**You should receive a feedback session with the Lead CS or other nominated supervisor to discuss the MCR and your self-assessment.**

**Repeat the above steps for the midpoint learning agreement, final self-assessment and final learning agreement.**

### 3B. ASSIGNED EDUCATIONAL SUPERVISOR SCREEN NAVIGATION

You will be able to see whether your trainees have transitioned to the new curriculum by clicking MY TRAINEES from the menu and then As Assigned Educational Supervisor.

The resulting page shows that trainees with the purple 2021 tab are now on the new curriculum. They will have a new style learning agreement which focuses objectives on achieving the GPCs and CiPs.

These trainees will also need be assessed with the new Multiple Consultant Report (MCR) which you will have responsibility for signing off after submission by the Lead Clinical Supervisor. The midpoint and final MCRs must be completed before the midpoint and final learning agreements respectively.

Select the **trainee / placement**.

Click the **Learning Agreements** tab and then the learning agreement meeting (OBJ for objective setting, MID for midpoint review or FIN for final review).

#### STEP 1 AND 2

Setting up a placement, creating a learning agreement and selecting the Lead CS are completed by the trainee. You and the trainee can then start the learning agreement and may share a screen to go through the objective setting form.

You or the trainee can amend the Lead CS if necessary - Click the marble for Select / Edit Lead CS

Select the radio button next to the name and then click the green **Save Lead Clinical Supervisor** button. You or the trainee can change the Lead CS in the same way at any time.

ISCP INTERCOLLEGIATE SURGICAL CURRICULUM PROGRAMME

MENU - DASHBOARD - **MY TRAINEES** - TRAINER AREA - FAQs

### My Trainees as Assigned Educational Supervisor

Current 3 Historic 1 Future 0

Filter by Specialty: All specialties  
Sort by: Trainee Name

#### Trainees in an active placement

|                                                  |                                                              |      |     |     |    |     |      |
|--------------------------------------------------|--------------------------------------------------------------|------|-----|-----|----|-----|------|
| Bussey, Maria Demo Trainee (Dr) [GMC: 111111111] | ST4 / Otolaryngology / Cardiff Royal Infirmary               | 2021 | LOG | WBA | PL | MID | 5    |
| demo, trainee (Mr) [GMC: 123456789]              | ST2 / Cardiothoracic Surgery / Abbey Gishburne Park Hospital | 2021 | LOG | WBA | PL | MID | 1    |
| Trainee Demo, Dental (Mr) [GMC: 9992222]         | ST3 / Orthodontics / Saxon Clinic                            |      | LOG | WBA | PL | -   | 10.2 |

Summary Placements **Learning Agreements** Portfolio Messages Journal Notes

Your Placements and Learning Agreements

01 Jan 2022 - Cardiff Royal Infirmary (Current)

OBJ MID FIN



Learning Agreement

View guidance Find resources

Lead Clinical Supervisor

Progress Summary

Choose the Lead Clinical Supervisor

Please select which of the Clinical Supervisors named on the placement will be acting as the Lead Clinical Supervisor.

When you save your selection the Learning Agreement is created and becomes available to the AES. The Lead Clinical Supervisor selected will be alerted that they have been selected and when both the MCR (mid-point) and MCR (final) become available to complete.

☒ DR Trainer 2 Champion [GMC: 6738211120]

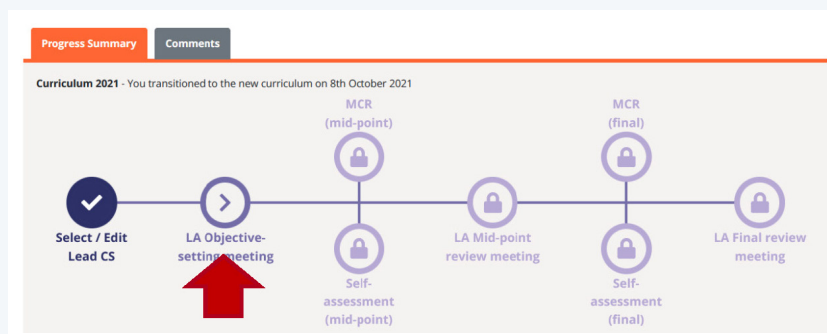
☐ Mrs AES Bussey [GDC: 333333333]

Progress Summary Save Lead Clinical Supervisor

### STEP 3

#### Complete the objective setting meeting

Click the **LA Objective-setting** meeting marble.



Enter the date on the cover page and click the green **Save and continue** button

Objective-setting meeting Meeting date | Objectives and Actions | Summary | Sign-off Progress summary

**Date of meeting**

Choose a date  
1st July 2021

**Global objective**

Welcome to the training programme. These guidance notes will help you achieve a good outcome at your ARCP. Please make sure you attend your induction to the programme and to your unit. Keep your ISCP portfolio, workplace-based assessments and the eLogbook up to... [More](#)

**ARCP (most recent)**

|                                                           |                                                                             |
|-----------------------------------------------------------|-----------------------------------------------------------------------------|
| <b>ARCP period</b>                                        | 20th March 2013<br>Annual<br>1st January 2012 - 6th March 2013              |
| <b>Recommendation</b>                                     | 5. Incomplete evidence presented – additional training time may be required |
| <b>Causes of concern</b>                                  |                                                                             |
| <b>Detailed reasons for recommended outcome</b>           | Test                                                                        |
| <b>Mitigating circumstances</b>                           |                                                                             |
| <b>Competences which need to be developed</b>             |                                                                             |
| <b>Recommended actions</b>                                |                                                                             |
| <b>Recommended additional training time (if required)</b> |                                                                             |

Progress summary Save and continue

Set objectives for the GPCs.

Previous MCRs will display (except for the first objective setting meeting following transition to the new curriculum).

Use the drop down box select a view of the GPCs as rated in the MCR. You can use these as a reference for setting new objectives.

With your trainee, set objectives in the first box. You can click the plus signs next to MCR descriptors to add them to the objectives box.

With your trainee determine the support they will need to achieve the objectives. This might include workplace-based assessment, courses, learning opportunities.

Set objectives for the GPCs.

**Learning Agreement** [View guidance](#) [Find resources](#)

Objective-setting meeting | Meeting date | Objectives and Actions | Summary | Sign-off | **Progress summary**

GPCs CIP 1 CIP 2 CIP 3 CIP 4 CIP 5

**View MCR and Self-assessment (most recent feedback) Generic Professional Capabilities**

GPC 1 - Professional values and behaviours

Select GPC

- GPCs - Areas for development
- GPCs - Appropriate for phase
- All GPCs
- GPC 1 - Professional values and behaviours
- GPC 2 - Professional skills
- GPC 3 - Professional knowledge
- GPC 4 - Capabilities in health promotion and illness prevention
- GPC 5 - Capabilities in leadership and team working
- GPC 6 - Capabilities in patient safety and quality improvement
- GPC 7 - Capabilities in safeguarding vulnerable groups
- GPC 8 - Capabilities in education and training
- GPC 9 - Capabilities in research and scholarship

1 out of 3 Contributors agreed with the MCR

**Self-assessment (most recent feedback) - GPC 1**

Created 8th October 2021 by Saxon Clinic

**Areas for development**

managing time and resources effectively

**Comments**

No comments

**Objectives and actions**

Objective-setting | Mid-point review | Final review

Add the objectives that the trainee should aim to meet over the next 3-6 months to aid their development (including certification requirements).

Add details about the support that will be provided to help the trainee achieve these objectives.

Meeting Date | **Save and continue**

Do the same with each of the CIPs.



Objectives may cover knowledge, clinical skills, decision-making, operative skills, index procedures/PBAs, critical conditions/CEX/CBDs, exams, courses and projects as relevant to each CiP.

Learning Agreement

Objective-setting meeting Meeting date Objectives and Actions Summary Sign-off Progress summary

GPCs CIP 1 CIP 2 CIP 3 CIP 4 CIP 5

View MCR and Self-assessment CIP 1 - Manages an out-patient clinic

**MCR (most recent feedback)**

Created 8th October 2021 by Mrs Bussey Clinical Supervisor 1 [GMC: 444444444] Saxon Clinic

Supervision level III

Areas for development

Assesses and prioritises GP and inter-departmental referrals and deals correctly with inappropriate referrals

Areas of excellence

**Self-assessment (most recent feedback)**

Created 8th October 2021 by Saxon Clinic

Supervision level IV

Areas for development

No areas for development highlighted.

Areas of excellence

No areas of excellence highlighted.

**Objectives and actions**

Objective-setting Mid-point review Final review

Add the objectives that the trainee should aim to meet over the next 3-6 months to aid their development (including certification requirements).

Add details about the support that will be provided to help the trainee achieve these objectives.

GPCs Save and continue

Check the **Summary** page and then go to the **Sign-off** page. The trainee will have first sign off of objective setting and the midpoint review. You will have first sign off of the final review because it incorporates your AES report.

Learning Agreement

Objective-setting meeting Meeting date Objectives and Actions Summary Sign-off Progress summary

trainee comment

No additional comments

NOTE: any comments saved as draft will be immediately viewable by the AES

add comments

No additional comments

Saving and signing-off this meeting

Sign-off Please select

Summary Save as draft

**Step 4 (the midpoint MCR) is completed by Lead CS / Clinical Supervisors.**

**STEP 5**  
**Sign off the MCR**

You will see the following alerts on your dashboard. Click these links to add information about the trainees, progress in GPCs 6-9, add general comments and sign off the MCR.

**The MCR (midpoint) created by [TITLE LEAD CS GMC: NUMBER], as Lead Clinical Supervisor for your trainee [TRAINEE NAME GMC NUMBER] is now ready for final sign-off.**

**The MCR (final) created by [TITLE LEAD CS GMC: NUMBER], as Lead Clinical Supervisor for your trainee [TRAINEE NAME GMC NUMBER] is now ready for final sign-off.**

**Alternatively, go to the trainee's learning agreement and click on the MCR marble. This will also show you the status of the MCR.**

**Follow the same steps for the midpoint and final learning agreement and MCRs.**

### 3C.LEAD CLINICAL SUPERVISOR SCREEN NAVIGATION

When **Steps 1-3** have been completed by trainee and Assigned Educational Supervisor, you will be able to complete the midpoint MCR which is recommended for placements of 6 months or longer.

You may wish to set up the MCR meetings well in advance to ensure attendance. They can be virtual or physical meetings. You will need to share your screen.

You will see the following alerts on your dashboard, indicating that you have been selected as the Lead CS for specific trainees:

**You have been selected as Lead Clinical Supervisor for your trainee [TRAINEE NAME GMC NUMBER]. Click here to see your responsibilities in this role.**

Clicking the link will take you to [MCR guidance](#)

When the MCR is ready, clicking on the following links will take you to the relevant MCR:

**The MCR (mid-point) for your trainee [TRAINEE NAME GMC NUMBER] is available for you to complete.**  
**The MCR (final) for your trainee [TRAINEE NAME GMC NUMBER] is available for you to complete.**

In the MCR meeting, open the MCR (and screen-share if possible), complete it on behalf of the group.

Rate GPC domains 1-9. The default rating is Appropriate for phase. You can add free text to elaborate. Use free text or click on descriptors to add them as development needs. Adding descriptors is only necessary for development needs. Do the same for each CiP, using free text or descriptors (max 5) to explain any ratings lower than IV. Excellence ratings can also be selected. There are additional specialty-specific CiPs for Cardiothoracic Surgery, Paediatric Surgery and Plastic Surgery.

You will not be able to access it after it is submitted, until it is signed off by the AES. Therefore, take time to look over the summary with the group before you submit it.

### Generic Professional Capabilities

#### GPC 1 - Professional values and behaviours

Appropriate for phase

Area for development

Your comments...

“ Select descriptors +

#### GPC 2 - Professional skills

Appropriate for phase

Area for development

Your comments...

“ Select descriptors +

#### GPC 3 - Professional knowledge

Appropriate for phase

Area for development

Your comments...

“ Select descriptors +

#### GPC 4 - Capabilities in health promotion and illness prevention

Appropriate for phase

Area for development

Your comments...

### Capabilities in Practice

#### CIP 1 - Manages an out-patient clinic

SUPERVISION LEVEL

IV

Your comments...

“ Select descriptors +

#### CIP 2 - Manages the unselected emergency take

SUPERVISION LEVEL

IV

Your comments...

“ Select descriptors +

#### CIP 3 - Manages ward rounds and the on-going care of in-patients

SUPERVISION LEVEL

IV

Your comments...

“ Select descriptors +

#### CIP 4 - Manages an operating list

SUPERVISION LEVEL

IV

Your comments...

The other clinical supervisors (including those who were unable to attend the meeting) will receive the following alert/link on their dashboards from which they will be able to open the MCR and make any extra comments within two weeks of submission:

**[LEAD CS NAME GMC NUMBER], as Lead Clinical Supervisor, has invited you to add comments to an MCR (mid-point/final) for [TRAINEE NAME GMC NUMBER] within the next 2 weeks.**

When all clinical supervisors have commented or when the two-week period has expired, the MCR will be available to the AES to comment and sign off.

You will receive the following alert/link to the final version in the trainee's portfolio. At this point, you should arrange a to have a feedback session with the trainee to discuss the MCR and self-assessment.

**The MCR (mid-point/final) for your trainee [TRAINEE NAME GMC NUMER] has now been signed off by the trainee's AES [AES NAME GMC NUMBER] and can be found in the trainee's portfolio.**

Guide to feedback session with trainees

**Follow the same steps for the final MCR.**

---

### 3D. CLINICAL SUPERVISOR SCREEN NAVIGATION

**STEPS 1-3** are completed by the trainee and Assigned Educational Supervisor.

#### STEP 4 Complete the MCR

When steps 1-4 have been completed by trainee and Assigned Educational Supervisor, you will be able to meet with other clinical supervisors to complete the midpoint MCR which is recommended for placements of 6 months or longer.

The Lead CS will arrange the MCR meeting which may be a virtual or physical meeting. Please see the [MCR guidance](#) for more information.

The Lead CS will complete the MCR in the meeting on behalf of the group (screen-sharing if possible).

Rate GPC domains 1-9. The default rating is **Appropriate for phase**. You can add free text to elaborate. Use free text or click on **Select descriptors** to add them as development needs. Adding descriptors is only necessary for development needs.

The screenshot displays the 'Generic Professional Capabilities' form, which is organized into four distinct sections, each corresponding to a GPC domain. Each section features a dark header bar with the domain name, a rating interface with two buttons ('Appropriate for phase' in green and 'Area for development' in grey), a text area for 'Your comments...', and a red 'Select descriptors' button. The domains shown are GPC 1 - Professional values and behaviours, GPC 2 - Professional skills, GPC 3 - Professional knowledge, and GPC 4 - Capabilities in health promotion and illness prevention.

| Domain                                                          | Rating                                       | Comments         | Descriptors        |
|-----------------------------------------------------------------|----------------------------------------------|------------------|--------------------|
| GPC 1 - Professional values and behaviours                      | Appropriate for phase / Area for development | Your comments... | Select descriptors |
| GPC 2 - Professional skills                                     | Appropriate for phase / Area for development | Your comments... | Select descriptors |
| GPC 3 - Professional knowledge                                  | Appropriate for phase / Area for development | Your comments... | Select descriptors |
| GPC 4 - Capabilities in health promotion and illness prevention | Appropriate for phase / Area for development | Your comments... | Select descriptors |

**Do the same for each CiP**, using free text or descriptors (max 5) to explain any ratings lower than IV. Excellence ratings can also be selected. There are additional specialty-specific CiPs for Cardiothoracic Surgery, Paediatric Surgery and Plastic Surgery.

Capabilities in Practice

**CIP 1 - Manages an out-patient clinic**

SUPERVISION LEVEL  
IV

Your comments...

Select descriptors

**CIP 2 - Manages the unselected emergency take**

SUPERVISION LEVEL  
IV

Your comments...

Select descriptors

**CIP 3 - Manages ward rounds and the on-going care of in-patients**

SUPERVISION LEVEL  
IV

Your comments...

Select descriptors

**CIP 4 - Manages an operating list**

SUPERVISION LEVEL  
IV

Your comments...

#### STEP 5

##### **Agree / Disagree with MCR (even if present at the MCR meeting)**

After the meeting you will receive the following alert/link on your dashboard from which you will be able to open the MCR and make any extra comments within two weeks of submission. You have the option to agree, disagree and add comments. Please use the link even if you have no additional comments.

**[LEAD CS NAME GMC NUMBER], as Lead Clinical Supervisor, has invited you to add comments to an MCR (mid-point/final) for [TRAINEE NAME GMC NUMBER] within the next 2 weeks.**

#### STEP 6

Is completed by the AES. When all clinical supervisors have commented or when the two-week period has expired, the MCR will be available to the AES to comment and sign off. After AES sign off you will be alerted when the MCR is viewable from the trainee's portfolio:

**The MCR (mid-point/final) for your trainee [TRAINEE NAME GMC NUMBER] has now been signed off by the trainee's AES [AES NAME GMC NUMBER] and can be found in the trainee's portfolio**

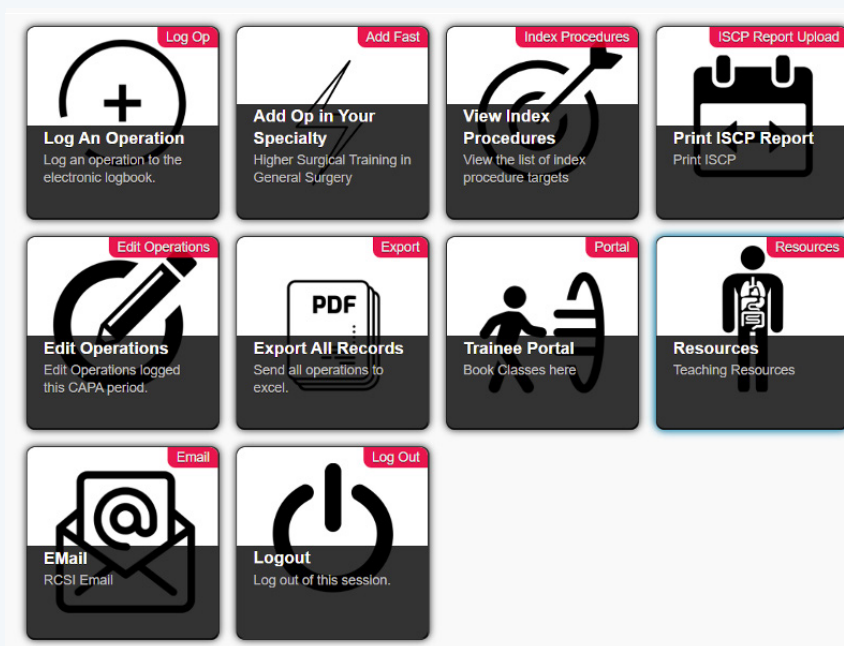
**Follow the same steps for the final MCR.**



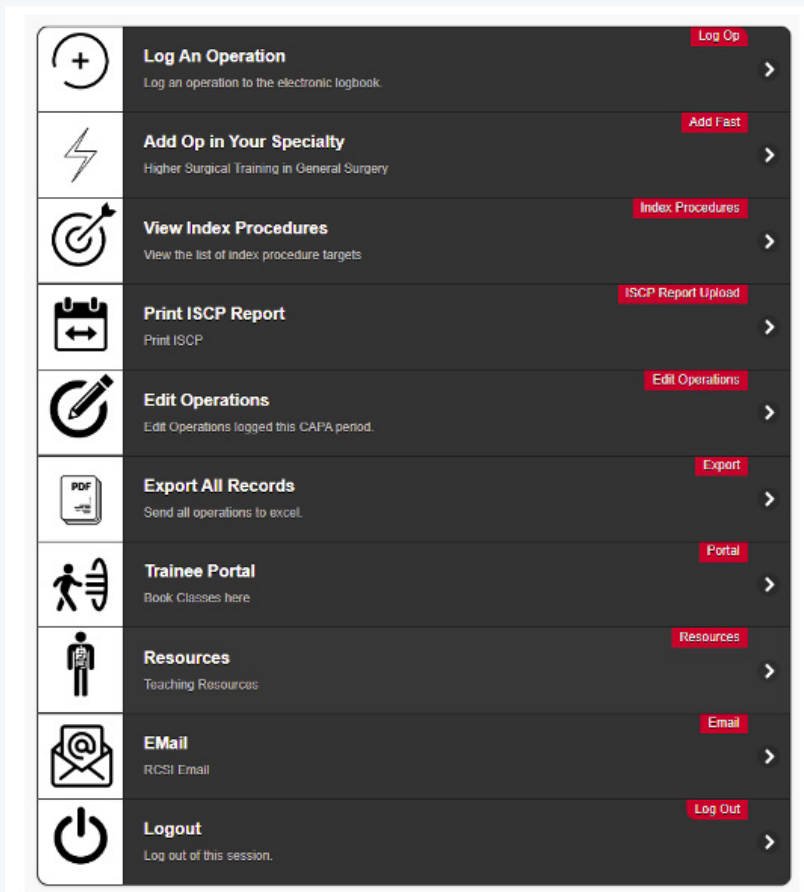
## APPENDIX 4: RCSI HST LOGBOOK

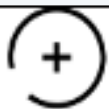
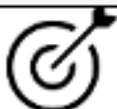






The HST Logbook will be familiar to anyone who has completed Core Surgical Training. The core operation logging is identical but there are different options available.

On a desktop – the menu will appear like this:



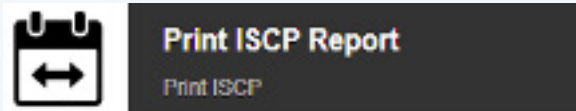
On a mobile the menu will appear like this:



|                                                                                     |                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                     |
|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|    | <b>Log An Operation</b><br>Log an operation to the electronic logbook.         | Use this to record an operation into the logbook. You will be able to select any specialty.                                                                                                                                                                                                                                                                                                                         |
|    | <b>Add Op in Your Specialty</b><br>Higher Surgical Training in General Surgery | Almost the same as 'Log an Operation' but it will not offer you to select from the list of specialties. This will also load quicker because it doesn't need to request the full list of operations.                                                                                                                                                                                                                 |
|    | <b>View Index Procedures</b><br>View the list of index procedure targets       | This will display the list of operations that your specialty has selected as index procedures. For example, if there is a target for your training programme of 50 lap chole operations, then it will display that target number and all the operations in the logbook that count to that group as there will be variations on the procedure (open/closed etc).                                                     |
|   | <b>Print ISCP Report</b><br>Print ISCP                                         | <p>This functions both as a summary of all your operations including list of ops, consolidation list and index procedure report. When approaching ARCP you can use this screen to download a PDF that can be uploaded to ISCP.</p> <p>To do this, use the date range option at the top of the screen, select the appropriate dates for the assessment period, right click and select 'print' and 'save to pdf'.</p> |
|  | <b>Edit Operations</b><br>Edit Operations logged this CAPA period.             | You can use this screen to make changes to any operations you have logged.                                                                                                                                                                                                                                                                                                                                          |
|  | <b>Export All Records</b><br>Send all operations to excel.                     | This will create an excel sheet of every operation you have logged in the logbook regardless of the time.                                                                                                                                                                                                                                                                                                           |
|  | <b>Trainee Portal</b><br>Book Classes here                                     | Because RCSI use a single sign on, if you are logged into the RCSI logbook you can use this to connect to the trainee portal and you will not be asked to login again.                                                                                                                                                                                                                                              |
|  | <b>Resources</b><br>Teaching Resources                                         | A collection of useful resources for trainees including surgical training videos, 360 videos, online anatomy etc.                                                                                                                                                                                                                                                                                                   |
|  | <b>Email</b><br>RCSI Email                                                     | Because RCSI use a single sign on, if you are logged into the RCSI logbook you can use this to connect to your online and you will not be asked to login again.                                                                                                                                                                                                                                                     |
|  | <b>Logout</b><br>Log out of this session.                                      | Log out of the Logbook and all RCSI online software.                                                                                                                                                                                                                                                                                                                                                                |

## Uploading a report to ISCP

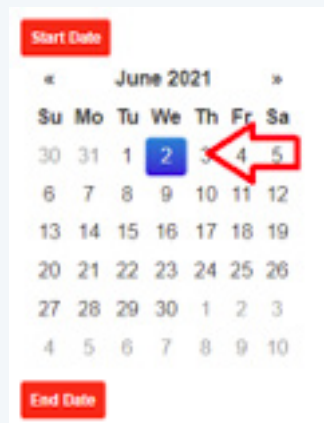
### 1. Click on ISCP Report



### 2. Select the Date Range Button



### 3. Select the start and end date as advised for this ARCP Period

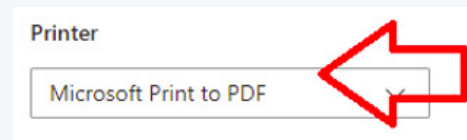


### 4. Print to PDF

Right click anywhere and select 'Print' from the menu.



### 5. Select "Print to PDF" or "Save to PDF" as the option.



### 6. Upload to ISCP:

This will save a pdf report that can be uploaded to ISCP.



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