Running a Skills Programme

Megan Roy *London Deanery General Surgical Skills Programme Manager*

Learning Objectives

- Effective Performance:
 - Recommend areas of improvement to promote patient safety and service quality
- Minimally Invasive Surgical Technologies: Provide examples of procedures which are predominantly performed by a minimal access approach; Discuss the role of simulation-based learning in acquisition of these skills
- Skill Acquisition, Training and Assessment: Recognise the technical considerations and limitations of simulation-based training and assessment

Clinical Skills Centre



London Deanery General Surgical Skills Programme

Apprædætiljukkingsing clinicians

- ▶ Only Programme on this scale
- ▶ Approx 200 trainees attend monthly
- ▶ All trainees are ST3-ST6 level and practising clinicians
- All trainers are consultants
- ▶ Pan-London since 2008 5th year
- Visitors from across the globe

Caveats ...

The Need for a Skills Programme

By integrating





surgical training

Allows skills acquisition in an environment that

- Does not compromise patient safety
- Does not raise difficulties about risk management

This approach will improve patient safety and meet public expectations on medical care.

Objectives

- To provide distributed laboratory training that matches the training stage in clinical practice and is tailored to the individual trainee's needs and abilities.
- To achieve a set of defined surgical competencies with exit criteria based on competence and educational objectives, rather than simply a 'time-served' criterion.

Pilot

Carried out in NW Thames region

Pilot

- Carried out in NW Thames region
- Proof of concept

Pilot

- Carried out in NW Thames region
- Proof of concept
- Learned from mistakes!

Be Professional

- Project Management
- Risk Management
- Insurance

Location, location, location ...



Top Level Support

- Deanery funded
- Programme Management Board

Chaired by Prof Standfield





Programme Director is Prof Hanna

Regional Training Programme Directors

MAKE IT COMPULSORY!!!

MAKE IT COMPULSORY!!!

- Protects the trainees from the hospital trusts
- Protects the patients from less self-aware trainees!

(It helps if it's free ..!)

Sponsorship

- Equipment
 - Loaned (e.g. Expensive hardware)
 - Consumables (e.g. Sutures)
- Workshops
 - Reduces costs
 - State-of-the-art





Skills ProgrammeTeam

- Manager
- Technician
- Model-maker
- Researcher



Trainers

- No Skills Centre 'in-house' faculty
- Only the best will do ...
- 6 weeks' notice
- Even they need reminding!
- Assistant Trainers

Organisation of Trainee Groups

- Data requested from Deanery
- Trainees requested to email the weekday with fewest clinical commitments
- Max group size = 12 trainees
- Allocated on first-come, first-served basis
- Currently 9 groups of ST3/ST4 trainees
- Trainees at a distance allocated to an all-day group

Flexibility

- Dates published at the start of the year
- Nine 'monthly' sessions omitting Oct, Dec and Aug.
- 99% sessions delivered on the scheduled date ... but not necessarily to the scheduled trainee!!!

Trainees

- Also need 6 weeks' notice
- Also need reminding!

Programme Content for ST3-ST4











Programme Content for ST5-ST6

- Breast trainees
- Colorectal trainees
- HPB/Upper GI trainees
- Vascular trainees
-Endocrine trainees?







Animal tissue vs synthetic



- Cost
- Ethics
- Cadavers
- Actors



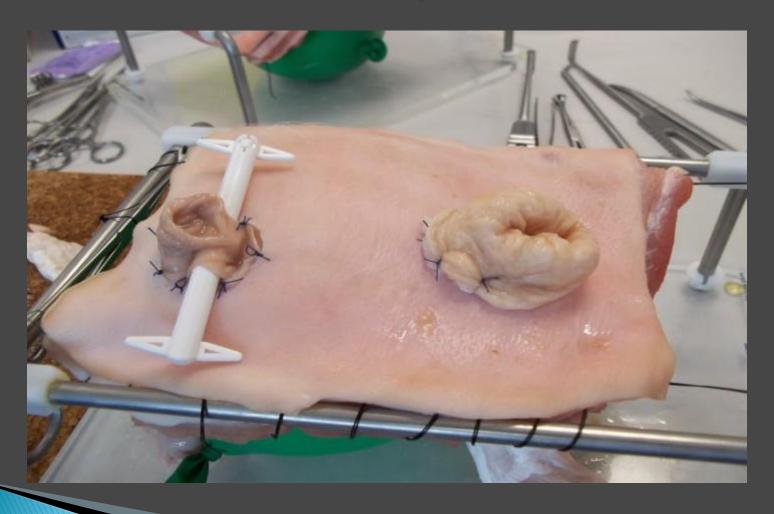
Don't Be Too Proud!

- Theatre remnants and ward rejects!
 - Non-sterile
 - Out-of-date

Creating a stoma using porcine tissue



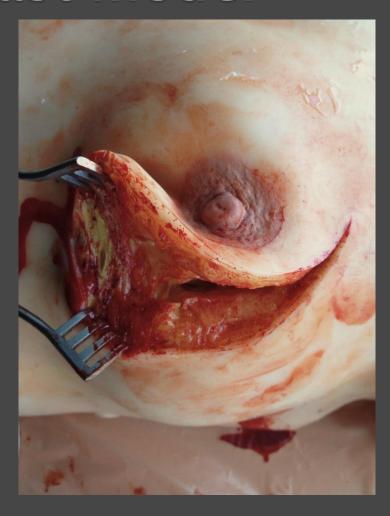
Stoma: finished procedure



Developing new models



New breast model



Trainee evaluation

			Lapa	roscopic g	astrojejunostom Mr Hakk
DAILY EVAL Wednesday 28 ^t					
Select one option for each item	Strongly	Disagree	Neutral	Agree	Strongly agree
The session has been well organised					V
Overall, the teaching has been effective					1/
This type of session has been an effective way of teaching this subject					
The tutors have given clear and understandable instructions					
The instructional material/models provided have been excellent					
Sufficient time has been given to complete each task					
Material presented was at an appropriate level of difficulty					
have become more competent in this area					1/
would recommend this session to other trainees					
What suggestions do you have for change? Outstanding l	eocher - , yet v	very were thorough	sehil pra ugh Erri	etical long	s + techniques nuctrice

Other Documentation

Attendance sheet for Friday 11th January, 2013 Month 2

Scanned

Session title: Energy Sources in Surgery Workshop

Session trainer: Mr Willson

ST Level Name Signature Region Clinical supervisor Clinical supervisor email address ST3 NW Supervisor A Trainee a@doctors.org.uk В Supervisor B Trainee SE ST3 b@gstt.nhs.uk ST4 Supervisor C SW c@gmail.com Trainee D SE ST4 Supervisor D d@gstt.nhs.uk Trainee Trainee NE ST3 Supervisor E e@nhs.net SE ST4 Supervisor F Trainee f@nhs.net SW ST3 Supervisor G g@imperial.nhs.uk Trainee Supervisor H NW ST3 h@wsht.nhs.uk Trainee SE ST3 Supervisor I i@nhs.net Trainee

Please check that all your details are correct and fill in any blank space

Feedback to Clinical Supervisor

LondonDeanery

Imperial College London

Contact : Megan Roy Programme Manager General Surgical Skills Programme Email m.roy@imperial.ac.uk Tel: 020 3312 2249

28 November 2012

Dear Ms. . g,

Thank you for releasing your trainee, a Skills Programme session today.

:o attend the London Deanery General Surgical

The topic was laparoscopic gastrojejunostomy.

As the consultant trainer for this session, I have the following comments about your trainee's performance, and suggestions for improvement:-

the stoody with the stip knot to start with but my lying by the end of the session.

He needs to doman cases to impose his autochtant and knot thrown.

The Skills Programme team would be extremely grateful if you could discuss these comments with your trainee, and provide technical advice and support with the topic, to help your trainee achieve competency.

Yours sincerely

Mr. Sherif Hakky

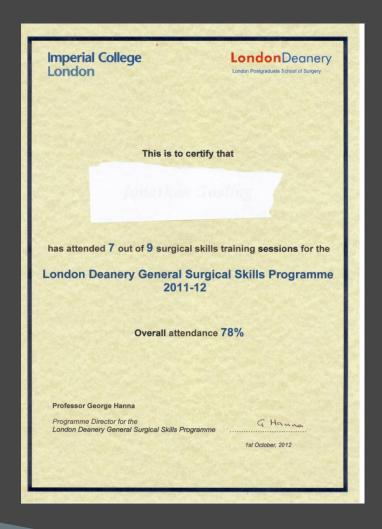
Formal Assessment

Included in ARCPs

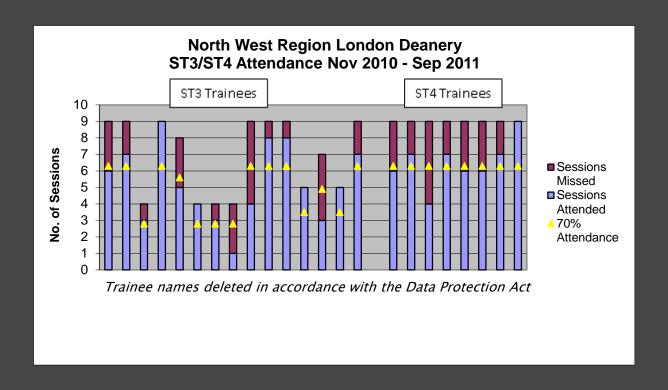




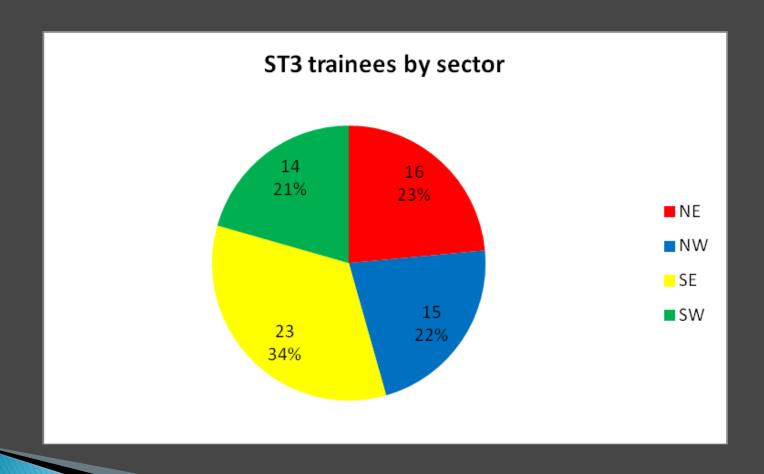
Certificate



Management Information 1



Management Information 2



Publications

Imperial College London

LondonDeanery

The London Deanery General Surgical Skills Programme at Imperial College London



The London Deanery General Surgical Skills Programme has become part of the standard London general surgical registrars' training. Trainees in clinical practice attend for half a day every month. There are currently 100 trainees at ST3 and ST4 levels, and 75 trainees at levels ST5 and ST6.

The integration of structured laboratory training with surgical training allows skills acquisition within an environment that does not compromise patient safety or raise difficulties about risk management. This approach will improve patient safety and meet public expectations on medical care.

- To provide distributed laboratory training that matches the training stage in clinical practice and is tailored to the individual trainee's needs and abilities.
- · To achieve a set of defined surgical competencies with exit criteria based on competence and educational objectives, rather than simply a "time-served" criterion.

Skills Programme Leaflet

Biannual Newsletter 🕨



Stoma care nurses presented cases where bad stoma locations had led to patient problems. Actors were used as models to demon process. Trainees then created stoma from large bowel connected to porcine belly

ENT Training

Following the success of monthly general sur gical skills teaching, London Deanery has funded specialist surgical training for ENT trainees. The training is led by Mr. Neil Tolley and Mr. Zaid Awad, Topics taught so far in-

- Skin flaps (using pigs' trotters)
- Branchascopy (using pareing lungs)

The branchoscopy and rhinoscopy teaching

Stoma created from porcine belly and large bowel

sessions were made possible by the loan of endoscopic equipment from Karl Stortz.

Energy Sources in Surgery Workshop

In December 2011 and again in February Topics covered included 2012, consultant Upper Gl surgeon. Mr. Peter Willson, in conjunction with

prised of a series of lectures and hands-on sessions demonstrating the use of a range of energy devices in surgery.

Trainees found it involvable to gain a deeper . Laser principles and applications understanding of the theory behind tools

they use in theatre, as well as trying out new Due to popular demand, we intend to re-run

Vessel sealing Harmonic dissection and division

Ablation theory and

- e Sells Programme points a medical medal adjust and asal the new
- whose is unadjected by laved und by gender.
- ent bring their name: ent to St. Mary's Hos-

Inside this issue:

Results and Analysis of 813/ 814 Trainee Surgical Feedback	
is surgical performance affected by gender?	2
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Breast trainees practice nipple reconstruction	
EVAR Workshop-photos	
New surgical models	
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Central up; if you have any comments or enquiries about this newstatur or the Deutsay Centeral Europea Either Program to in general, please contact the gain Roy, London Deutsay General Surginal Statis Pro-grams of Manage (chast Buydelbaphallunus) or phone 902 0312 2249).

Website

Believe it or nor, this is the shortened version ...

http://ww1.imperial.ac.uk/medicine/divisions/surgeryandcancer

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Alternatively, go to the Imperial website http://imperial.ac.uk and search for *Deanery skills*

Extension of Programme to other areas

- **ENT**
- Transplant
- Energy Sources Workshop







Any questions?

