Incorporating Day Surgery Principles into the UK Core Training Surgical Curriculum

KIAN CHIN

It has been a hectic last six months. Shortly after the BADS ASM 2015 in Torquay, BADS was approached by the Royal College of Surgeons in England Surgical Training Committee to open discussion looking into ways to incorporate day surgery training objectives into the core surgical training. This is undoubtedly an exciting and excellent opportunity for BADS to create another platform to disseminate all the knowledge we have achieved from the ambulatory care community.

Core surgical training (CST) takes place after the foundation years for doctors. There is a competitive interview process through which junior doctors are selected for two years of training. Therefore, knowledge gained at CST forms an important foundation for the trainees’ future higher surgical training.

The 2015 Intercollegiate Surgical Curriculum Programme for core training contains 10 modules. The syllabus dictates various competencies need to be achieved at the end of two years:

- Basic Science knowledge relevant to surgical practice
- Common surgical conditions
- Basic Surgical Skills
- The principles of assessment and management of the surgical patient
- Peri-operative care of surgical patient
- Assessment and early treatment of the patient with trauma
- Surgical care of the paediatric patient
- Management of the dying patient
- Organ and tissue transplantation
- Health promotion

However, there is no specific reference made to competencies in day surgery skills. Therefore, any knowledge gained is usually on an ad hoc basis, sometimes only if the trainee is assigned to working with a Surgeon whose workload are primarily day cases. Furthermore, by the end of CST, it is expected that surgical trainees are competent in operating on common conditions like hernia, varicose veins and laparoscopic cholecystectomy all of which are regarded as day cases in many hospitals. Therefore, it is indeed counterintuitive when the NHS Plan sets a target of 75% of all elective surgery to be carried out as day cases and yet there are nonesuch dedicated training opportunities in the Surgical Curriculum. In contrast, the UK Royal College of Anaesthetists Training Curriculum contains Day Surgery as an essential component for trainees at basic, intermediate and higher level training.

The recent BMJ article by Professor John Appleby (Chief Economist, Kings Fund) highlighting the importance of day surgery to the NHS has been a timely coincidence also. In order to sustain such benefits of day case surgery, clearly it is paramount that we have the appropriate framework to train our future Day Case Surgeons. Professor Appleby will be giving a lecture titled: ‘Day case surgery: a good news story for the NHS’ at the next BADS ASM June 2016 in Nottingham. See you all there!

References

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Author’s Address
MR KIAN CHIN FRCS BADS Executive Council / Conference Secretary