



Mr David Large
Chairman of the T&O SAC

Welcome to the first, of what I hope will become a 6 monthly, newsletter from the SAC for trauma and orthopaedics. One of the aims of JCST in its 2013 strategy document was: *”to raise the profile of the JCST among trainees, trainers and opinion-formers and to increase awareness and understanding of what we do”* and I, as new chairman of the SAC, see a newsletter such as this being a key component in achieving that strategic aim. In these newsletters I will aim to give you an overview of SAC business and the SAC’s views on current issues affecting training.

Firstly I should introduce myself. My name is David Large, and I took over from Mark Goodwin as chairman of the SAC on 1 January. I will be chairman of the SAC for the next 3 years.

I graduated from Edinburgh University in 1978 and did my basic surgical training in Edinburgh followed by higher surgical training in Aberdeen, getting my certificate of higher surgical training, as it was then, in 1988. I then



undertook a research fellowship in paediatric orthopaedic surgery in the Royal Children’s Hospital, Melbourne, following which I returned to Aberdeen to continue my senior registrar post until I was appointed as a consultant in Ayr hospital in 1992.

Ayr, for those of you who don’t know, is a small seaside town on the Firth of Clyde with a population of approximately 46,000. Ayr hospital has 333 beds and provides services for a catchment area of approximately 170,000 population. Although initially appointed as a consultant with a special interest in paediatric orthopaedic surgery, local service redesign resulted in me relinquishing that interest and concentrating on lower limb arthroplasty and trauma.



As well as my clinical interests, as a consultant I have also had interests in information technology in the health service, and also in training. My interest in IT started as an SHO when I was involved in a project on computer assisted diagnosis and evolved from there. I was lead clinician for the implementation of Ayr Hospital’s information system in 1995. My interest in training started with being invited to contribute to an FRCS course and then contributing to the basic surgical skills

course. I ended up convening the orthopaedic component of this course for the Royal College of surgeons of Edinburgh. I went on to take part in one of the first train the trainers type courses and then became faculty of that course soon after. I was appointed as training programme director for orthopaedics in the West of Scotland in 2004 and I continued in that role until August of last year. To date being TPD has been the most satisfying thing I have done professionally. I joined the SAC in June 2011 and have been vice-chairman since June 2013.

Over the last year or so I have been able to combine my geekish IT interests with my determination to provide quality training by analysing e-logbook data in Excel and thus identifying where best to deliver training in the West of Scotland. My hope is that, over the next year or so, by working with the e-logbook that we will be able to make the sort of data that I have extracted more readily available to programme directors and trainers and so improve training nationally.



Fellowships

For many years going on a fellowship has been seen by many as an important part of their orthopaedic training, and an opportunity to travel the world and gain specialist skills. Many of you will have seen a recent email sent out to all TPDs indicating the SAC's current view on

Fellowship training. This view was the outcome of discussion at the SAC's meeting in December.

Discussion on the topic considered a number of issues. Firstly the fact that currently not all TPDs allow trainees to go away on Fellowship creating an uneven playing field for trainees at the end of training. Secondly, the fact that TPDs face increasing difficulty in backfilling vacancies for out of programme due to a shortage of potential LAT trainees. Thirdly we discussed the need to keep the hand interface fellowships pre-CCT. Finally the discussion was set against the backdrop of future changes in line with the Greenaway report, and the very variable quality of overseas fellowships. Some are excellent, but some appear to offer more experience of travel and the world than they do of surgery.

The consensus view of the SAC following its discussion of the topic was that: with the exception of the hand interface fellowships that all Fellowship training should be post CCT.

I have been careful in my choice of words above, reflecting the advisory nature of the SAC's role. The regulations for out of programme training are laid down in the gold guide, which we cannot change. They state that OOPT is only with the agreement of local postgraduate deans who will normally seek the advice of their programme director. In stating its view the SAC is giving support to TPDs, the majority of whom wish to see an end to OOPT, and also hopefully discouraging trainees from looking for pre-CCT fellowships.

The SAC appreciate that fellowships can take a long time to organise and therefore that there will be a number of trainees currently in the process of arranging such experience but who have yet to have it approved as part of their training. Therefore, so long as these applications are supported by the Dean and programme director the SAC will continue to consider the recognition of these fellowships. We would, however, wish to discourage trainees from considering fellowships as a rite of passage through orthopaedic training in the UK.



Exam Changes

There have been 2 recent changes in relation to the arrangements for the intercollegiate specialty examination which I should draw your attention to.

Many of you will have seen the revised examination reference form. Superficially that does not appear to be particularly different from the previous version, but hidden within it is an important change. That is the need for satisfactory ARCP outcome at the end of ST6. Where this becomes particularly important is in relation to the timing of ARCP reviews and closing dates for examinations. I would encourage TPDs to look at the dates when they carry out ARCP reviews and see how these relate to exam closing dates. There is the potential that carrying out ARCP reviews at some times of year may significantly limit the time period over which senior trainees can sit the examination before their anticipated CCT date.

The other thing that I would wish to draw your attention to is that the section of the part one examination on the appraisal of a scientific paper will disappear with effect from the November 2014 diet. It will be replaced by 12 MCQ questions covering the same material such as study design statistics etc.

Trajectory of Training

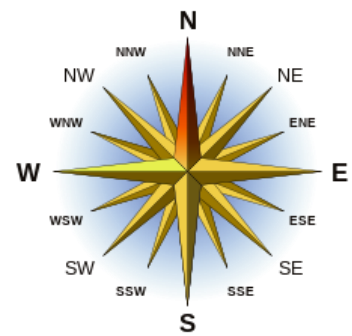
Finally, for this newsletter, a word on something that you will hear more about over the coming months. The criteria and guidelines for the award of a CCT have become more specific over the last few years. Along with this there have been from time to time cases where trainees have reached the end of 6



years of training significantly short of some of the indicative criteria. This is always an awkward situation to

handle, and one which is best avoided. To this end JCST, in keeping with the practice of a number of other colleges, developed penultimate year checklists. Many of you will have seen these being introduced to orthopaedics over the last year or so. The problem with doing checking progress against specific criteria at the end of ST 7 is that by that stage it is often too late to remedy any major deficits.

JCST has therefore asked the SAC is to develop what they call waypoint assessments to monitor the trajectory of training and ensure that trainees remain on target for their CCT. The penultimate year checklist, which



is based around the guidelines for the award of CCT was approved by the SAC at their last meeting and has been distributed to programme directors.

The waypoint assessments are slightly more complicated and are still in need of some refinement, but will hopefully be approved at the next SAC meeting. This should be in time for this summer's round of ARCP reviews.