

**School of Postgraduate Surgery Visit to  
Princess Alexandra Hospital NHS Trust  
Visit Report  
Friday 7th November 2014**

<b>HEEoE representatives:</b>	<p><b>Mr Neville Jamieson - Head of EoE Postgraduate School of Surgery and Associate Dean</b>  <b>Dr Jonathan Waller - Deputy Postgraduate Dean - Quality</b>  <b>Mr Stephen Pryke - Chair, EoE Trauma and Orthopaedics Specialist Training Committee</b>  <b>Ms Susan Agger - Senior Quality Improvement Manager</b>  <b>Mr Raymond Marlborough - Regional Coordinator, The Royal College of Surgeons of England</b></p>
<b>Trust representatives :</b>	<p><b>Dr Jolanta McKenzie - Medical Director</b>  <b>Mr Jonathan Refson - Director of Medical Education</b>  <b>Mr Ahmed Abidia - College Tutor for Surgery</b>  <b>Mrs Margaret Short - Medical Education Manager</b></p>
<b>Number of trainees &amp; grades who were met:</b>	<p><b>7 Trainees , 1 Locum and 1 Trust Grade Doctor were met:</b>  <b>7 Core –CT1 x5; CT2 x1; Locum x1</b>  <b>1 Higher – 1x General Surgery; 1x Trust Doctor</b></p>

**Purpose of visit :**

In accordance with the review of the delivery of surgical training in all Trusts in the East of England, a visit was undertaken to The Princess Alexandra Hospital NHS Foundation Trust on 7th November 2014.

This visit, planned by the School of Surgery, provided the chance to review the delivery of both core and higher surgical training in the surgical specialities within the Trust.

With the closure of the A&E Departments at QEII Hospital Welwyn and Chase Farm there has been a significant increase in the workload at the Trust. The pressure of work has altered the way that training is experienced.

**Strengths:**

The Trust provides valuable training opportunities. The trainees reported a supportive department with friendly approachable consultants. Handover was good and all trainees had an appropriate Trust and departmental induction. The trainees had a named educational supervisor and the delivery of educational supervision was good. Trainees were able to complete work-place based assessments [WPBAs]. The support from the Service Manager in the Urology Department, Mr John Rogers, was commended by the trainees.

The delivery of training for the higher General Surgery trainee was reported as good. There was adequate experience to meet curriculum targets.

**Areas for Development:**

The following areas were highlighted:

1. The core trainees were able to meet the needs of the clinical aspects of the surgical curriculum; however the SMART criteria are not explicit within the training programme. When constructing the rota consideration needs to be given to allowing for trainees to meet the SMART criteria. These are available from the JCST website <http://www.jcst.org/quality-assurance/documents/qis/core-qis>
2. As currently configured there is a single rota which includes the foundation, GP and core trainees. It was noted, however, that the goals and aims of core training are different to the old style "SHO". The development of a structured core training programme has required a more focussed approach to how training is delivered. Accordingly a redistribution of the training roles of foundation, GP and core trainees needs to be undertaken, with the differentiation of core trainees. In particular the foundation trainees need higher levels of on-site supervision and the same level of responsibilities and competencies must not be expected of them by their clinical supervisors and nursing and other allied health professionals. It is suggested that, in order to do this, consideration is given to the introduction of a rota which doesn't include, for example, the Foundation Year 2 trainees in activities such as theatre which are a requirement for the core surgical trainees.
3. There are questions around the increase in workload affecting the delivery of training particularly for the core trainees. Trainees who had worked at the hospital both before and after the increased workload produced by the A and E closures reported a significant decrease in training opportunities secondary to the increased workload and work intensity which had ensued resulting in their time being taken up more with service delivery which took them away from valuable training opportunities . This has resulted in a situation where the posts do not appear to provide sufficient appropriate experience to meet the criteria necessary to apply for ST3 posts in some cases and this is of course the central purpose of core surgical training.
4. It was difficult to comment on the Higher trainees as they did not attend the visit. It is essential that future visits are organised in such a way that the trainees do attend despite being on London training rotations.

**Significant concerns:**

There were no significant concerns.

**Requirements:**

1. The rota and training programme needs to be constructed so that trainees are able to meet the SMART criteria
2. Reconfiguration of the rota to differentiate between the training requirements of foundation, GP and core surgical trainees
3. The delivery of training for the current core trainees needs to be reviewed to ensure there is sufficient appropriate experience

**Recommendations:**

1. Consideration could be given to other professional groups e.g. advanced nurse practitioners undertaking some of the roles of the junior trainees to allow them to focus on training opportunities – this has been highly effective in some other regional units (T&O at Norwich and in a rather different setting Cardiothoracic at Papworth). Thought could also be given to introducing a night nurse practitioner with an appropriate skill set.
2. Access to a room to allow the trainees to stay rather than returning home and coming back to the Trust to cover the nights could be reviewed.
3. The T&O umbrella be reviewed as the way it is currently configured may have a negative effect on developing confidence in theatre

**Action Plan to Health Education East of England by:**

An action plan is required by 28<sup>th</sup> February 2015.

**Revisit:** November 2015

**Visit Lead:** Mr Neville Jamieson

**Date:** 24 November 2014