

Education Committee Report

October 2014

The Committee has been busy on a number of fronts in the last year. As part of our work reviewing the vascular courses currently run by the RCSE in London we had a very constructive Vascular Portfolio Day with staff from the Education Department at the College in October. Also present at this meeting were a number of newly recruited Course Directors, who are now co-opted members of the committee.

The Amputation Course served as a good model for the day in terms of development in order to align it with the new vascular curriculum and the needs of the new vascular trainees. As such there was agreement that this now needs much greater emphasis on toe & foot amputation and much more time spent on the major lower limb amputations, which are of most relevance to trainees at ST3&4 at whom the course is primarily directed. As part of our overall strategy new pre-course materials, including an element of pre-course assessment, are being developed prior to the next course in February 2015. These are to enable delegates to arrive more prepared and will reduce the amount of lecture time required on the course so that as much as possible is devoted to practical work.

The Amputation Course has included sessions on rarely performed procedures such as Symes, hindquarter and upper limb amputation. There was general agreement that these are not of relevance to trainees but an acknowledgment that we should look to provide a library of information for rarely performed procedures, including links to relevant video material, as part of an e-learning initiative. This is also being done in conjunction with the RCS in London, who have appointed Sean Matheiken as their Lead for E-Learning. If any members have particular skills in this area or material they feel may be of relevance and are willing to get involved in this exciting initiative I'd be grateful if they could establish contact with me either directly or via the VS office.

Some of the courses currently provided by the College are of limited viability in their current format for a variety of reasons, primarily expense to delegates and the difficulty of running courses requiring patient involvement. Examples include the Modern Management of Varicose Veins and Essential Vascular Ultrasound courses and the agreed solution in these cases is to develop these to be run regionally as VS courses, with RCS input for materials, e-learning etc.

The Committee is also about to collaborate with the Vascular SAC on a major project to identify facilities for simulation related to the vascular curriculum. Whilst there is general acknowledgment that simulation is of benefit in training, the GMC remains reluctant to make it compulsory for medical training in general, partly because of a lack of evidence of its role but more importantly because of a lack of uniform availability. The reality is that simulation will become increasingly utilized and it is up to us a specialty to identify aspects of simulation which we feel are of most relevance and how we ensure that these are made available to trainees. While some of this will inevitably be in relation to courses there is also a need to integrate more regular sessions involving simulation as part of training programmes e.g. as part of local and regional training days.

The Committee works closely with the Intercollegiate Exam Board on development of the FRCS Vascular Exam, which is scheduled to start in 2017. Vascular surgeons who are current FRCS General Surgery examiners will, in the main, move across to the

new exam but there is need to recruit new examiners to increase the available pool. Anyone wishing add this role to their portfolio will need to attend an induction course at the College in Edinburgh prior to acting as an examiner for the FRCS General Surgery initially in order to gain experience.