



# General Surgery Education and Training Program

An Overview of the Development Process



## Overview

The purpose of this document is to provide an overview on the process undertaken in the development of the GSET program.

## Historical Context

The General Surgery training program has transformed and adapted over the past years to remain aligned to regulatory requirements, changes in workforce and educational developments. An overview of the timeline of significant changes is highlighted below:

Year	Program
2007 and prior	Four-year Advanced Surgical Training (AST) program in General Surgery following successful completion of two-year Basic Surgical Training (BST). Both programs required trainees to interview for positions.  Note: This period also included the implementation and eventual discontinuation of the three plus two program.
2008	Commencement of single entry into Surgical Education and Training (SET) program commencing at SET1. This signalled the removal of the two interview process with candidates having the ability to apply and commence in their chosen specialty. Clinical Examination, Generic Surgical Science Examination and Specialty Specific Surgical Science Examination became a SET requirement with completion by end of SET2. Failure to pass the examinations resulted in dismissal from the program.
2014	Following identification of issues relating to the educational value of the Specialty Specific Surgical Science Examination and the continued high number of dismissals of trainees, this requirement is removed by the then Board in General Surgery and replaced with SEAM.
2016	Following the Strategic Review (refer to Section 28.3) changes to the selection criteria were implemented resulting in the then Board removing the SET1 training year and all trainees commenced at the level of SET2.
2017	The Generic Surgical Science examination was removed from the SET program and was made a selection criteria.

## Strategic Review

In October 2014, the then Board agreed to undertake a strategic review of the SET program. This was an important initiative to ensure General Surgery training remained contemporary and relevant. The objectives of the review were to:

- Assess all aspects of the SET program
- Assess aspects of activities that impact on surgical training
- Determine a plan to progress General Surgery training based on the review

In November 2014, stakeholder engagement was undertaken with the following:

- Trainee Representatives
- General Surgery Supervisors
- Board in General Surgery Members
- GSA and NZAGS Presidents

- RACS Dean of Education
- RACS Chair, Board of Surgical Education and Training
- RACS Censor-in-Chief

An anonymous survey was undertaken that presented participants with questions on the following areas:

- Selection process and tools
- Clinical and operative training
- Courses during training
- Research
- Training to meet community needs
- Use of assessment tools
- Process of assessment
- Preparedness for Fellowship Exam
- Changing requirements and expectations of the General Surgeon and how this is reflected in surgical training

A 43% response rate was received to the survey. The responses were analysed for themes by Monica Carrarini, GSA – Director, Education and Training and the then Chair of the Board.

A Strategic Review Workshop was held in February 2015 with the member of the Board in General Surgery and GSA and NZAGS staff. The aim of the workshop was to discuss the main issues that were prevalent in the survey with the aim of proposing strategies to address the issues.

The Strategic Plan was finalised and approved by the Board in April 2015, following which four working parties were established as follows:

- Assessment Working Party
- Operative Experience Working Party
- Supervision Working Party
- Training Requirements Working Party

During 2015 – 2017 the Working Parties convened to review the issues, develop strategies and pilot tools.

## **Working Parties**

### **Supervision Working Party**

The issues relating to the Supervision Working Party were managed through the building respects campaign undertaken by RACS. However, the Working Party were successful in altering the Hospital Surgical Supervisor Position Description and including a greater focus on paid protected time for supervisors during hospital inspections.

### **Operative Experience Working Party**

The issues relating to the Operative Experience Working Party were managed through the change to the utilisation of SNOMED terms to minimise double counting and to more accurately reflect the procedure undertaken, and to include a sixth operator category of partial primary operator.

## **Assessment Working Party**

The issues relating to the Assessment Working Party pertained to the methods used for assessment together with the ability to provide appropriate feedback to trainees to enable them to improve and progress. The main issues were:

- Expected level of performance was not clearly defined for the SET levels and hence supervisors were unable to adequately assess and give feedback.
- Assessment processes did not enable meaningful or accurate work-based assessment of performance.
- Supervisors and Trainees did not routinely share learning expectations for any given term of training.

The strategies reviewed and determined by the Working Party to address these issues were:

- Define core performance and behavioural requirements for key stages of training.
- Incorporate observable behaviours using EPAs and PBAs in in-training assessments, aligned to key stages of training.
- Formalise start of term review of portfolio to promote discussion and documentation of learning objectives and goals.

The Working Party developed key EPAs and PBAs that were pertinent to the graduating general surgery trainee. A Pilot Project was undertaken during 2017 to ensure that the EPAs and PBAs developed were meeting the objectives. Supervisors and Trainees were asked to volunteer to participate in the pilot. Both supervisors and trainees were requested to provide feedback on the tools. The feedback was designed to enable both quantitative and qualitative analysis, following which the Working Party reviewed the feedback and incorporated into the tools.

## **Training Requirements Working Party**

The Training Requirements Working Party were charged with reviewing the following issues:

- Impact of safe working hours on experience and training opportunities.
- Dilution of operative training experience from increasing presence of fellows on units.
- Reduced pre-vocational experience and preparedness for commencing surgical training.
- Trainees graduating without adequate consolidation of knowledge and skills.

The strategies reviewed and determined by the Working Party to address these issues were

- Clearly articulate the graduate outcome.
- Restructure program to include a post exam year in order to consolidate learning and readiness for practice.
- Devise a point system for the fulfilment of the Research requirement.

## **Approval and Implementation**

In March 2018, the recommendations from the Training Requirements and Assessment Working Party were presented to the Board in General Surgery and approved. The Board agreed to title the program General Surgery Education and Training Program (GSET) to differentiate it from the SET program. A submission was made to the RACS, Board of Surgical Education and Training outlining the proposed changes and requesting in principle approval. The approval was provided in June 2018.

An Implementation Working Party was established in July 2018 with the purpose of overseeing the development of the new GSET Regulations and implementation of the program, taking into consideration all the recommendations that were approved.

In order to ensure further stakeholder engagement, a roadshow was undertaken whereby a presentation and feedback session was held with the Australian Training Committees. The feedback was then considered by the Implementation Working Party in the development of these Regulations.

The following process was undertaken by the Implementation Working Party in the development of these Regulations:

September 2018	<ul style="list-style-type: none"> <li>• Reviewed the SET regulations to determine the areas that required altering.</li> <li>• Determined the principles pertaining to the changes.</li> <li>• Agreed on the number of EPAs and PBAs.</li> <li>• Draft overview of program rules and skeleton of program were produced.</li> <li>• Roadshows were undertaken across the Australian Training Committees to obtain feedback.</li> </ul>
March 2019	<ul style="list-style-type: none"> <li>• Review of literature pertaining to competency based training, EPAs and educational principles and theory was undertaken to ensure contemporary terminology and educational principles were incorporated.</li> <li>• Review of program skeleton and rules taking into consideration feedback from Roadshows with final decisions made by Working Party.</li> <li>• First draft of regulations written and reviewed for alignment to RACS policies.</li> <li>• Competency domain descriptors drafted.</li> </ul>
June 2019	<ul style="list-style-type: none"> <li>• Second draft of regulations reviewed and finalised.</li> <li>• Meeting with RACS Education and Legal department for input to ensure legal, policy and educational alignment.</li> </ul>
July 2019	<ul style="list-style-type: none"> <li>• Suggestions from RACS incorporated into draft regulations.</li> <li>• Draft presented to Board meeting highlighting changes and aspects that remained status quo.</li> <li>• Board provided feedback and suggested changes.</li> </ul>
September 2019	<ul style="list-style-type: none"> <li>• Changes from the Board incorporated into the regulations.</li> <li>• Board provided final approval of Regulations.</li> </ul>
February 2020	<ul style="list-style-type: none"> <li>• Work commenced on the IT platform</li> </ul>
April 2020	<ul style="list-style-type: none"> <li>• Implementation of GSET was delayed until Term 1 – 2022 due to the uncertainty regarding COVID.</li> </ul>

## Acknowledgements

The Australian Board in General Surgery wishes to acknowledge the following Fellows who have been members of the Board or Working Parties during this process.

### **Members of the Board in General Surgery and Australian Board in General Surgery from 2014 to 2021**

#### **Chair**

- Dr Adrian Anthony FRACS 2013 - 2015
- A/Professor Elizabeth Dennett FRACS 2015 - 2017
- A/Professor Kellee Slater FRACS 2017 - 2019
- Dr Sayed Hassen FRACS 2019 - 2021

#### **Deputy Chair**

- A/Professor Elizabeth Dennett FRACS 2013 – 2015
- A/Professor Kellee Slater FRACS 2015 - 2017
- Dr Sayed Hassen FRACS 2017 - 2019
- A/Professor Vijayaragavan Muralidharan FRACS 2019 - 2021

#### **Senior Examiner**

- Dr Simon Banting FRACS 2014 - 2016
- Dr Wendy Brown FRACS 2016 - 2018
- Dr Anil Keshava FRACS 2018 to 2020
- Dr Greg Keogh FRACS 2020 to 2021

#### **Chair, New South Wales – ACT Training Committee**

- Dr Julie Howle FRACS 2014 – 2018
- Dr Gabriella Vasica FRACS 2018 - 2021

#### **Chair, New Zealand Training Committee**

- Dr Rowan French FRACS 2013 - 2016
- Dr Simon Bann FRACS\* 2016 - 2021

#### **Chair, Queensland Training Committee**

- Dr Richard Bryant FRACS 2013 - 2018
- Dr Priscilla Martin FRACS 2018 - 2021

#### **Chair, South Australian - NT Training Committee**

- Dr Paul Hollington FRACS 2013 - 2016
- Dr Robert Whitfield FRACS 2016 - 2021
- Dr Christopher Dobbins FRACS 2021

#### **Chair, Victorian – Tasmanian Training Committee**

- A/Professor Vijayaragavan Muralidharan FRACS 2014 - 2017
- Dr Satish Warriar FRACS 2017 - 2021

### **Chair, Western Australian Training Committee**

- Dr Michael Warner FRACS 2013 – 2016
- Dr Andrew Thompson FRACS 2016 - 2019
- Dr Mary Theophilus FRACS 2019 - 2021

### **Australian Trainee Representative**

- Dr Daniel Foley FRACS 2014 - 2016
- Dr Thomas Arthur FRACS 2016 – 2018
- Dr Roderick McMurray 2018 – 2020

### **New Zealand Trainee Representative\*\***

- Dr James Mckay 2014 – 2015
- Dr Roberto Sthory 2015 - 2017
- Dr Suheelan Kulasegaran 2017 - 2018

### **RACS Rural Representative**

- Dr Brian Kirkby FRACS 2012 - 2021

### **RACS Specialty Councillor**

- Dr Alan Saunder FRACS 2012 - 2015
- Professor David Fletcher FRACS 2015 – 2021

### **Community Representative**

- Ms Fiona Vines 2017 - 2019

### **Surgical Sciences Exam Committee Representative**

- Professor Richard Turner FRACS 2007 - 2016
- Dr Wendela Schimmer FRACS 2018 - 2021

### **Chair, SEAM Working Party**

- Mr Sayed Hassen FRACS 2011 - 2021

### **President, General Surgeons Australia**

- Dr Michael Donovan FRACS 2014 - 2017
- Dr Trevor Collinson FRACS 2017 - 2021

### **President, New Zealand Association of General Surgeons**

- Dr Philippa Mercer FRACS 2014 - 2016
- Dr Andrew Moot FRACS 2016 - 2018
- Dr Julian Speight FRACS 2018 – 2020

*Notes: \* Dr Simon Bann became the Chair of the New Zealand Board in General Surgery in December 2018 following the separation of the Board.*

*\*\* The position of New Zealand Trainee Representatives ceased in December 2018 following the separation of the Board and the position was transferred to the New Zealand Board in General Surgery.*

### **GSET Implementation Working Party**

- Dr Ee Jun Ban FRACS (Victoria)
- Dr Brian Kirkby FRACS (Queensland)
- A/Professor Vijayaragavan Muralidharan FRACS (Victoria)
- Professor Richard Turner FRACS (Tasmania)
- Dr Gabriella Vasica FRACS (New South Wales)
- Monica Carrarini – GSA, Director – Education and Training

### **Supervision Working Party**

- Dr Adrian Anthony FRACS (South Australia)
- A/Professor Elizabeth Dennett FRACS (New Zealand)
- Dr Sarah Martin FRACS (Victoria)
- Dr Alan Saunder FRACS (Victoria)
- A/Professor Kellee Slater FRACS (Queensland)
- Dr Robert Whitfield FRACS (South Australia)
- Monica Carrarini – GSA, Director – Education and Training

### **Operative Experience Working Party**

- Dr Simon Bann FRACS (New Zealand)
- Dr Richard Bryant FRACS (Queensland)
- Dr David Moss FRACS (New Zealand)
- Dr Ben Privett FRACS (Victoria)
- Dr Michael Warner FRACS (Western Australia)
- Monica Carrarini – GSA, Director – Education and Training

### **Assessment Working Party**

- Dr Andrew Audeau FRACS (New Zealand)
- Dr George Bursle FRACS (New South Wales)
- Professor David Fletcher FRACS (Western Australia)
- Dr Rowan French FRACS (New Zealand)
- Professor Richard Turner FRACS (Tasmania)
- Monica Carrarini – GSA, Director – Education and Training

### **Training Requirements Working Party**

- Dr Joanne Dale FRACS (Queensland)
- Dr Paul Hollington FRACS (South Australia)
- Dr Julie Howle FRACS (New South Wales)
- A/Professor Vijayaragavan Muralidharan FRACS (Victoria)
- Dr Murray Pfeifer FRACS (New Zealand)
- Dr Phil Worley FRACS (South Australia)
- Monica Carrarini – GSA, Director – Education and Training