

2019 Training Data Analysis

Topic: ATSM/APM training

Background

In April 2018, the RCOG introduced changes to the delivery of the obstetric ATSMs. The advanced labour ward practice, maternal medicine, fetal medicine, labour ward lead and advanced antenatal care modules have been re-written and restructured so as to avoid duplication with the core curriculum and other ATSMs. This will mean that trainees who have undertaken one ATSM may use the evidence from that against the new one.

Training Issues/ Questions

- a) Do trainees have adequate dedicated sessions for completion of their ATSM?
- b) Do trainees feel they will achieve level 3 competences?
- c) Do trainees feel they have adequate exposure to surgical or practical procedures?
- d) Are they satisfied with the training provided in their current unit?

Analysis

In the 2019, there were 1,452 UK NTN holders, with 800 responses to the ATSM questions. There were 240 trainees at ST6 and 240 at ST7. In total, the RCOG has 921 ATSM registrants indicating a significant number of registrants who were either in their Period of Grace or who were not trainees. Such doctors did not receive the survey. There is a general downward trend in responses to the ATSM questions over the last three years.

TEF analysis of ATSMs

For the analysis, the total number of trainees for each ATSM were taken as those who responded to question 1 of the survey. When assessing if trainees were able to get adequate ATSM sessions/gain level 3 competencies/recommend their unit, the results reflect responses that scored 'strongly agree' or 'agree'.

(*merged data from pre-2018 and post- 2018 ATSM respondents)

Acute gynaecology and early pregnancy (n=41)

There has been a continued decline in uptake of this ATSM amongst trainees. 61% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and 51% felt they had developed to achieve level 3 competencies. 59% of respondents felt as though they had adequate exposure to surgical or practical procedures. Overall, 68% of trainees would recommend their unit to other trainees, this is lower than in 2018 when this figure was 70%.

Advanced antenatal practice (n=21)

In 2018, the High Risk Pregnancy ATSM has superseded this module. 81% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and 86% felt they had developed to achieve level 3 competencies. 57% of respondents felt as though they had adequate exposure to surgical or practical procedures. Overall, 81% of trainees would recommend their unit to other trainees; this is higher than in 2018 when this figure was 74%.

Advanced Labour Ward Practice (n=341) *

In 2018, this module was updated. The feedback was similar for each curricula so was analysed together. There has been a continued decline in uptake of this ATSM amongst trainees. 70% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and 67% felt they had developed to achieve level 3 competencies. This is surprising, as most trainees have day time labour ward sessions. 79% of respondents felt as though they had adequate exposure to surgical or practical procedures. Overall, 81% of trainees would recommend their unit to other trainees; this is similar to 2018 when this figure was 84%.

Advanced laparoscopic surgery for excision of benign disease (n=14)

There has been a small and steady increase in trainees taking this ATSM. These numbers have increased since national recruitment and control was removed, but will never be large. 50% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and to achieve level 3 competencies. 57% of respondents felt as though they had adequate exposure to surgical or practical procedures. These figures are all reduced compared to 2018. Overall, 71% of trainees would recommend their unit to other trainees.

Benign abdominal surgery - open and laparoscopic (n=73)

There has been a continued decline in uptake of this ATSM amongst trainees. 54% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and 51% felt they had developed to achieve level 3 competencies. 54% of respondents felt as though they had adequate exposure to surgical or practical procedures. Overall, 65% of trainees would recommend their unit to other trainees; in 2018 this figure was 68%.

Benign gynaecological surgery –hysteroscopy (n=43)

There has been a continued decline in uptake of this ATSM amongst trainees. 53% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and 47% felt they had developed to achieve level 3 competencies. 49% of respondents felt as though they had adequate exposure to surgical or practical procedures. Overall, 65% of trainees would recommend their unit to other trainees, which is similar to the 2018 results.

Colposcopy (n=4)

Colposcopy ATSM training has been static at low levels, presumably because most trainees complete BSCCP accreditation. There is no TEF data to analyse for the colposcopy ATSM because, with the module change in 2016, when the data has been pooled together n=3 and in keeping the guidance, this data is not sufficiently anonymised to publish.

Fetal medicine (n=46) *

In 2018, this module was updated. The feedback was similar for each curricula so was analysed together. There has been an increase in uptake of this ATSM. 76% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and 57% felt they had developed to achieve level 3 competencies. 61% of respondents felt as though they had adequate exposure to surgical or practical procedures. Overall, 74% of trainees would recommend their unit to other trainees, this is lower than in 2018 when this figure was 87%.

High risk pregnancy (n=20)

This is a new module for 2018. 65% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and 60% felt they had developed to achieve level 3 competencies. 70% of respondents felt as though they had adequate exposure to surgical or practical procedures. Overall, 80% of trainees would recommend their unit to other trainees.

Labour ward lead (n=20)

In 2018, this module was updated. The feedback was similar for each curricula so was analysed together. The numbers taking this module have been very similar over the last three years. 50% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and 80% felt they had developed to achieve level 3 competencies and felt as though they had adequate exposure to surgical or practical procedures. Overall, 95% of trainees would recommend their unit to other trainees, this is better than in 2018, when this figure was 63%.

Maternal medicine/Obstetric Medicine (n=42) *

In 2018, the maternal medicine module was updated and renamed Obstetric Medicine. The feedback was similar for each curricula so was analysed together. There has been a decline in uptake of this ATSM amongst trainees. 86% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and 71% felt they had developed to achieve level 3 competencies. 64% of respondents felt as though they had adequate exposure to surgical or practical procedures. Overall, 86% of trainees would recommend their unit to other trainees; this is similar to that in 2018.

Medical education (n=11)

There has been a continued decline in uptake of this ATSM amongst trainees. 82% of trainees felt as though they had adequate ATSM sessions to fulfil their

requirements and 100% felt they had developed to achieve level 3 competencies. Overall, 100% of trainees would recommend their unit to other trainees; this is an improvement from 2018 when this figure was 71%.

Menopause (n=4)

This module continues to have a small numbers of trainees. 50% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and 50% felt they had developed to achieve level 3 competencies. Overall, 75% of trainees would recommend their unit to other trainees; this figure was 80% in 2018.

Paediatric and Adolescent gynaecology (n=0)

No trainees have taken this module since 2017.

Oncology (n=36)

Numbers of trainees completing this module have remained reasonably level. 69% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and 39% felt they had developed to achieve level 3 competencies. 69% of respondents felt as though they had adequate exposure to surgical or practical procedures. Overall, 75% of trainees would recommend their unit to other trainees, similar to 2018.

Sexual health (n=2)

There has been a continuous decline in those taking this module. Due to $n < 3$ the TEF data has not been published due to lack of respondent anonymity.

Subfertility and reproductive health (n=32)

Numbers of trainees completing this module have remained reasonably level. 72% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and 56% felt they had developed to achieve level 3 competencies. 66% of respondents felt as though they had adequate exposure to surgical or practical procedures. Overall, 69% of trainees would recommend their unit to other trainees, this is higher than in 2018 when this figure was 59%.

Urogynaecology and vaginal surgery (n=34)

There has been a decline in uptake of this ATSM amongst trainees. 79% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and only 35% felt they had developed to achieve level 3 competencies. 71% of respondents felt as though they had adequate exposure to surgical or practical procedures. Overall, 79% of trainees would recommend their unit to other trainees, this is similar to 2018.

Vulval disease (n=8)

There have been consistently low levels of trainees completing this module. 57% of trainees felt as though they had adequate ATSM sessions to fulfil their requirements and only 43% felt they had developed to achieve level 3 competencies. 57% of respondents felt as though they had adequate exposure to surgical or practical procedures. Overall, 57% of trainees would recommend their unit to other trainees.

Conclusions

Review of all modules suggests that there are a significant number of trainees who do not believe they have developed the necessary independent competences for their module. This is of particular note in the modules that require practical/surgical expertise and is at least 50% in the following modules - Acute Gynaecology & Early pregnancy, Advanced laparoscopy for the excision of benign disease, Benign gynaecology: open and laparoscopic, fetal medicine, Oncology and urogynaecology & vaginal surgery. It is, however, not possible to know how many of these trainees were ST6 and therefore still gaining competences.

Across all the practical/surgical modules, there appears to be a belief that the trainee hasn't had enough sessions to meet the requirements of the module. It is notable that 33% of trainees undertaking the Labour Ward Lead module believe they have had insufficient sessions and yet all have the required competences.

In general, the trainees are reporting regular supervision meetings despite the fact that they may not be gaining the necessary level 3 competences. It would be good to correlate this by linking these questions as there is no way to determine if those trainees who do not get the competences are those who don't get access to regular supervision.

Again, it would be good to link the acquisition of competences against the perception of sessions needed. Unfortunately the small numbers make it impossible to drill down to individual units and thus determine which areas require improvement.

Recommendations

The agreement is that a trainee should have two ATSM sessions a week if they are full time and perhaps further clarity is needed on this. Trainees doing the gynaecology surgical modules may well expect two theatre lists a week rather than perhaps a theatre list and a clinic/scan session, which will also be needed to fulfil all the criteria. It's notable that the trainees doing the Obstetric Medicine Module report high levels of satisfaction whereas those undertaking the more surgical modules don't.

Due the persistent low numbers, consideration should be given to whether the Paediatric and Adolescent Gynaecology and Sexual Health ATSM's should continue to be offered. Gynaecological ATSMs are due to be reviewed and revamped

following the introduction of the new curriculum which may result in increased interest in some of these areas

Suggestion for GMC survey speciality specific questions (SSQs)

Because there are often only 1 or 2 trainees in a unit undertaking ATSMs it isn't really possible to add any questions in this section as it would make the trainees identifiable

Suggestions for changes to TEF questions

To address the concerns about trainees not gaining level three competencies, the question could be changed to 'Do you think you will require extra time in order to achieve the necessary competences for this ATSM?' This may provide sufficient breakdown to show the ST6 trainees who have not reached level 3, but feel as though they are making adequate progress for their level of training.

To address concerns about lack of exposure to surgical procedures, there could be question asking why this is. A suggested wording is 'Have you lost access to practical procedures due to rota gaps, winter pressures leading to cancelled elective work, lack of supervision and competition from other senior trainees in the unit.' This should be in the form of a list with trainees able to tick several responses.

Report authors

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Appendix 1: TRENDS IN ATSM's 2017-9

ATSM	Total trainee respondents 2017	Total trainee respondents 2018	Total trainee respondents 2019
Acute Gynaecology and Early Pregnancy	73	61	41
Advanced Antenatal Practice	41	30	21
Advanced Labour Ward Practice	425	365	162
Advanced Labour Ward Practice 2018	-	-	179
Advanced Laparoscopic Surgery	10	13	14
Benign Abdominal Surgery: Open and Laparoscopic	100	87	73
Benign Gynaecological Surgery: Hysteroscopy	55	48	43
Benign Vaginal Surgery	0	-	-
Colposcopy	4	6	4
Fetal Medicine	23	30	23
Fetal Medicine 2018	-	-	23
Forensic Gynaecology	0	0	-
High Risk Pregnancy 2018	-	-	20
Labour Ward Lead	23	20	11
Labour Ward Lead 2018	-	-	9
Maternal Medicine	50	51	20
Obstetric Medicine 2018	-	-	22
Medical Education	19	18	11
Menopause	5	7	4
Oncology	34	40	36
Paediatric and Adolescent Gynaecology	1	1	0
Sexual Health	6	5	2
Subfertility and Reproductive Health	31	37	32
Urogynaecology and Vaginal Surgery	49	43	34
Vulval Disease	5	3	8
Total	963	876	800

