



# Information & Advice for Plastic Surgery Trainees in response to COVID-19

# Thursday 19th March 2020

The COVID-19 pandemic will have a significant impact on plastic surgery trainees in the UK with regards to our health and well-being, that of our families and loved ones, and our clinical practice. The situation is changing daily and the impact on training is unpredictable in terms of its extent and how long it will last, but there is no doubt that it will be significant.

This document has been prepared by the PLASTA UK Executive committee. It intends to serve as a comprehensive list of useful resources at the time of writing, and a list of tips relevant to plastics trainees in the current situation.

Please be reassured that PLASTA UK is in regular communication with the SAC, JCST, and other surgical specialty training associations regarding the impact of the ongoing pandemic on surgical training, and we will continue to do our utmost to represent you at this difficult time. There will undoubtedly be further challenges ahead of us with regards to a number of developing training issues, and we would ask for your support whilst the best way forward is considered in the context of an unprecedented situation.

If you have a specific concern or have identified an issue that has not yet been addressed below then please do get in touch with your PLASTA Regional Representative, the Executive Committee, or me personally.

Look after each other and best of luck over the coming months,

Ben

Benjamin Baker PLASTA President 2020





# Advice from PLASTA UK

In these difficult circumstances the impact upon us as trainees and our training is unpredictable, and there may be consequences that are currently unforeseen. We would therefore advise trainees to:

- Keep a record of missed training opportunities including elective operating lists and clinics.

- Ensure that if asked to assist / work outside your current scope-of-practice that you continue to follow GMC guidance (see below), ensure that you keep both yourself and your patients safe.

- If you are concerned about being asked to work outside your current scope of practice, not being able to rotate on April 1st, or the impact of the COVID-19 outbreak on your ability to meet ARCP requirements, contact your Postgraduate Dean in the first instance.

- If you have any queries or concerns not answered here, please feel free to reach out to PLASTA (<u>vicepresident.plasta@gmail.com</u>) and we will do our best to help.

This is an unprecedented healthcare challenge, creating additional anxiety for trainees navigating an already complex career pathway, but it is one that PLASTA are confident we can all rise to as professionals and as a specialty.

Look after <u>yourselves</u>, your loved ones, your <u>colleagues</u>, and your patients.





#### Useful external resources

#### **Regulation of trainees and indemnity**

Healthcare regulators in the UK, including the GMC, have produced guidance on how they will regulate doctors in light of COVID-19 (<u>found here</u>), and the specific implications for trainees (<u>found here</u>).

**Summary**: Doctors should continue to exercise professional judgement, but the GMC recognises care delivered may depart from established procedures. Any concerns raised will be considered in context of the environment and situation, as well as any protocol or guidance in place at that time.

Trainees should not be asked to work beyond their level of competence and should receive appropriate induction and supervision if deployed to different clinical areas. Interruption to training should be taken into account at ARCPs. You may be asked to sign a EWTD waiver at your discretion, but normally requires 1 month's notice for cancellation.

# <u>Indemnity</u>

<u>MDU guidance</u> for doctors and trainees echoes this. Their support line is available at 0800 716 646 8am to 6pm Monday to Friday, or 24/7 for urgent queries.

The <u>MPS has a particularly helpful Q&A</u> page giving advice on best practice, for instance, in conducting remote clinic appointments, denying/suspending routine care e.g. cancer follow-up, and what to do if asked to perform tasks outside your level of competencies.

# Joint statement with surgical specialty trainee associations

PLASTA have produced a joint statement with the other Surgical Specialty Training Associations, co-ordinated by ASiT, <u>found here</u>.

# Impact on ARCPs and training progression





The JCST have released a comprehensive document detailing a number of surgical training-related issues, found here. Of note, ARCPs are likely to take place remotely and with a reduced panel size. JCST guidance has been to ensure the trainee's progression had been on track **prior** to the COVID outbreak, and advises a pragmatic approach where certain requirements have not been met (eg, WBAs, certain required courses). Senior, post-exam trainees, should not necessarily need extra training time. Guidance for pre-exam trainees is still awaited.

# **Rotations**

<u>Health Education England have announced</u> this week that trainees will NOT rotate on 1 April 2020 as planned, to mitigate the impact of 20,000 doctors being moved to an unfamiliar working environment. The Dean for each Deanery should be able to make exceptions to this on a case-by-case basis or local arrangements or wider clinical circumstances may require it and will be subject to departmental inductions, appropriate supervision and support.

They have also produced a statement regarding the role of trainees and the impact on training and assessment against curricula, <u>found here</u>. They emphasize that although trainees may be redeployed, they should not work outside of their competencies, and should be appropriately supervised/know who they are reporting to. **The Postgraduate Dean must be made aware of any trainee redeployment** to ensure it is appropriate and trainees are appropriately supervised.

#### **Courses and conferences**

The intercollegiate statement from the Surgical Royal Colleges can be found here.

**Summary:** Conferences, educational and training courses, assessment panels, accreditation visits and examinations that require travel will be postponed. Where possible, activities will continue if these can be delivered by video call or webinar. Events within hospitals may continue if local circumstances allow this. These arrangements will remain in place until at least the end of the summer in the first instance.

# <u>Exams</u>

Due to social distancing requirements, the upcoming Part 1 FRCS Plast Specialty Exams due in June 2020 have been cancelled until further notice. Given the unprecedented nature of





COVID-19, it is difficult to determine when the next sittings of both Parts 1 & 2 of the FRCS exam will be rearranged. More information can be found <u>here</u>.

<u>Summary</u>: For examinations already paid for, participants will be booked onto the next available slot, once activities resume. In the interim no further payments for affected activities will be accepted, but waiting lists will be established to help with fair allocation of slots once activities resume.

# National selection

Health Education England have released a joint statement to all candidates who were due to partake in the upcoming National Selection ST3 Interviews on April 2nd & 3rd. This can be found <u>here.</u> (include BAPRAS update from today).

All face to face interviews have been cancelled due to social distancing developments however please be reassured that the SAC and HEE are currently in discussion to determine whether alternative recruitment processes are feasible. More information can be found <u>here.</u>

We will endeavour to update you once more information is available.

# Oriel Update

#### **Inter Deanery Transfers**

We are aware that there are some trainees due to be transferring into a new deanery in the coming weeks, and that there may be significant implications for them and their families, including cases where relocation has already taken place prior to the IDT. In some instances, the statement from HEE regarding trainee rotations has meant that IDTs have been reconsidered by training regions. If you find yourself in difficulty with regards to an IDT, please liaise with your TPD.

PLASTA are committed to supporting trainees in these circumstances and, as we have done already, will escalate concerns on behalf of trainees if deemed necessary.

# OOPE/OOPR/OOPT





Those trainees currently out of programme for training, experience or research may find themselves being asked to return to their host deaneries to support local clinical staff. At this stage this has not been made mandatory and the logistics may not be practical, for example if you are currently in another country where international travel restrictions are in place. However, we would advise you to remain in contact with your educational supervisor and local training lead or TPD to investigate the local provisions and what is expected of you at this stage.

Many trainees who are OOPR and undertaking higher degrees may find that their research is significantly affected by the current situation, which may last for some time. This presents several issues including: insufficient time to complete experiments/trials prior to end of degree programme/OOPR due to closure of universities, insufficient funding to continue in current post, lack of support in return to training/clinical environment if asked to support clinical staff etc. Clearly these are very individualised problems and there is no blanket rule for all. We would advise you to discuss your concerns with your educational supervisor, seek to provide clinical support where asked and only if you are safe to do so and only within your current capabilities. In addition, start thinking about what support you will need in your research endeavours going forward such as extensions to OOPR time and funding and begin to discuss these with your educational supervisor and TPD over the coming months.

# **Fellowships**

Fellowships will be impacted by training opportunities whilst on fellowship, the trainees ability to travel to their fellowship destination, and ability to meet fellowship application requirements.

# TIGs

Trainees who are successful at TIG selection will be able to undertake the fellowship even if they have not passed section 2 of the FRCS exam as long as they have their AES's and TPD's support that they are on track to meet their parent specialty curriculum requirements and are expected to do so by their new provisional certification date. They will need to pass section 2 of the FRCS during their TIG fellowship year in these circumstances.

#### **Other fellowships**





If trainees have organised either pre-CCT and post-CCT fellowships then they should discuss these plans with their TPD in light of the current situation to make sure that the impact of the virus on training can be mitigated where possible.

#### Management of Coronavirus patients

NHS England have produced guidance on the management of patients with confirmed or suspected COVID-19 in secondary care including:

- Infection prevention and control including how to use PPE effectively
- Investigation and initial management
- Testing

This is all <u>available here</u>. A handy summary table of appropriate PPE in different settings is available on page 24 of <u>this document</u>.

#### Self-isolation

Department of Health guidance on who should self-isolate can be found <u>here</u>. You should receive full pay while self-isolating. Trusts may ask you to sign a self-declaration/sickness absence declaration form.

#### Annual leave and study leave

Your employer may cancel study or annual leave. It is within their rights to do so in exceptional circumstances. See the <u>BMA website Q&A page</u> for more detail.

# Pregnant trainees and those with other health conditions

There is a huge amount of confusion following the recent government advice (<u>found here</u>) as to whether pregnant healthcare workers and those with underlying health conditions should come to work, and if they do, in what capacity.

The BMA website has a useful Q&A page on this topic.

**Summary:** Trainees in both categories should contact Occupational Health and their line manager. Your employer has a duty to keep you (and your unborn child) safe. Your manager will





need to complete an updated risk assessment, and discuss whether duties can and should be amended, for instance to allow you to work from home. This should be done without loss of pay. If workplace amendments or redeployment are not possible, you should be suspended on full pay.

<u>RCOG have released new guidance</u> for pregnant healthcare workers March 18th (see page 32).

**Summary:** there is currently no evidence that pregnant healthcare workers are at higher risk of contracting coronavirus than their non-pregnant colleagues. **However**, it is possible that infection with COVID-19 could result in preterm birth or fetal growth restriction, and therefore, discussion with Occupational Health is suggested.

If you have further concerns or queries on this topic, please feel free to reach out to <u>vicepresident.plasta@gmail.com</u> and we will do our utmost to help advise.

End.