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COLLEGE OF PHYSICIANS AND
SURGEONS OF CARDIFF
ERUDITIO, NOVATIO,
EXCELLENTIA, MISERICORDIA,

ESSENTIAL SURGICAL SKILLS AND PRINCIPLES FOR ASPIRING SURGEONS (ESSPAS)

Academic, Regulatory, and Operational Governance Framework

Document Title: Academic, Regulatory, and Operational Governance Framework for ESSPAS

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1. Purpose

This document establishes the academic, regulatory, and operational governance framework for the Essential Surgical Skills and Principles for Aspiring Surgeons (ESSPAS) course.

It defines:
- governance structures and reporting lines;
- roles and responsibilities;
- quality assurance and audit mechanisms;
- risk management and compliance processes.

This framework ensures that the course is delivered in accordance with recognised standards in surgical education, regulatory requirements, and principles of patient safety.

2. Scope

This governance framework applies to:
- all faculty involved in the delivery of the course;
- all participants enrolled in the course;
- all administrative and academic processes supporting the course.

3. Governance Principles

The ESSPAS course shall operate in accordance with the following principles:
- Academic Integrity: All teaching shall be evidence-based, current, and subject to review.
- Accountability: Responsibilities shall be clearly defined and formally assigned.
- Transparency: Governance decisions and processes shall be documented.
- Quality Assurance: Continuous monitoring and improvement shall be embedded.
- Regulatory Compliance: All activities shall comply with applicable legal and professional standards.
- Patient Safety Orientation: Training shall prioritise safe clinical practice and procedural discipline.

4. Governance Structure

Governance is structured across three levels:

1. **Strategic Oversight:**
   Academic Advisory Group (AAG)

2. **Academic and Operational Leadership:**
   Course Director

3. **Course Delivery:**
   Faculty Body

5. Course Director

5.1 Authority
The Course Director holds overall responsibility for:
- academic standards;
- curriculum integrity;
- regulatory compliance;
- course delivery and governance.

5.2 Responsibilities
The Course Director shall:
- approve and oversee curriculum design;
- ensure alignment with recognised surgical training standards;
- appoint and supervise faculty;
- oversee quality assurance and audit processes;
- ensure compliance with legal and regulatory requirements;
- review incidents and implement corrective actions;
- report to the Academic Advisory Group.

5.3 Eligibility
The Course Director must:
- be a consultant surgeon or senior academic equivalent;
- demonstrate active involvement in surgical education;
- hold current professional registration (e.g., GMC where applicable).

6. Academic Advisory Group (AAG)

6.1 Role
The Academic Advisory Group (AAG) provides independent academic oversight and strategic direction.

6.2 Responsibilities
The AAG shall:
- review and approve curriculum content;
- ensure alignment with current surgical education frameworks;
- monitor educational outcomes and quality indicators;
- review participant and faculty feedback;
- advise on course development;
- ensure academic integrity and relevance.

6.3 Composition
The AAG shall include:
- consultant surgeons;
- academic surgical educators;
- senior clinical trainers;
- medical education specialists.

6.4 Meetings and Decision-Making
- The AAG shall meet at least annually.
- Additional meetings may be convened as required.

- Quorum is a minimum of 50% of members.
- All decisions shall be formally recorded.

7. Faculty Governance

7.1 Appointment
Faculty shall be appointed by the Course Director following verification of credentials and assessment of clinical and educational experience.

7.2 Eligibility
Faculty must demonstrate:
- relevant qualifications;
- active or recent clinical practice;
- experience in teaching or training.

7.3 Responsibilities
Faculty shall:
- deliver teaching in accordance with the approved curriculum;
- supervise practical training;
- enforce safety and infection control protocols;
- provide structured feedback;
- model professional behaviour.

7.4 Performance Management
Faculty performance shall be reviewed through:
- participant feedback;
- peer observation (where applicable);
- Course Director evaluation.

Continued appointment is contingent on satisfactory performance.

8. Course Delivery Model

The course shall be delivered using a structured simulation-based educational model comprising:
- demonstration of procedures;
- supervised practical training;
- immediate structured feedback.

Delivery shall:
- prioritise safe operative technique;
- ensure supervised skills acquisition;
- reinforce procedural reasoning.

9. Curriculum Governance

9.1 Curriculum Standards
The curriculum shall:
- reflect contemporary surgical practice;
- align with competency-based training frameworks;
- integrate patient safety principles;
- include both technical and cognitive skill development.

9.2 Curriculum Review

The curriculum shall be reviewed periodically by the AAG, incorporating:

- participant feedback;
- faculty input;
- developments in surgical education.

10. Participant Governance

10.1 Eligibility

Participants shall include:

- clinical-year medical students;
- foundation doctors;
- early-career clinicians;
- allied healthcare professionals.

10.2 Responsibilities

Participants shall:

- comply with professional conduct standards;
- adhere to safety and infection control requirements;
- engage actively in training.

11. Training Environment and Safety

11.1 Simulation Environment

Training shall be conducted in a simulated environment replicating operative conditions.

11.2 Safety Requirements

All participants shall:

- use appropriate personal protective equipment (PPE);
- follow sharps safety protocols;
- adhere to aseptic technique.

12. Biological Tissue Governance

12.1 Source and Compliance

Biological tissue shall be:

- sourced from licensed suppliers;
- compliant with UK animal by-product regulations;
- traceable and appropriately handled.

12.2 Handling and Disposal

Procedures shall include:

- use of PPE;
- controlled storage and preparation;
- disposal through approved waste systems.

13. Risk Management and Incident Governance

13.1 Risk Assessment
All activities shall undergo formal risk assessment prior to delivery.

13.2 Incident Management
- Incidents must be reported immediately.
- All incidents shall be documented.
- The Course Director shall review and implement corrective actions.

13.3 Escalation
Where necessary, issues shall be escalated to the AAG and the venue.

14. Quality Assurance and Audit

14.1 Monitoring
Quality shall be monitored through:
- structured participant feedback;
- faculty evaluation;
- defined performance indicators.

14.2 Continuous Improvement
Feedback shall inform:
- curriculum refinement;
- teaching improvements;
- course development.

14.3 Audit
Periodic internal audit shall assess:
- compliance with governance standards;
- effectiveness of delivery;
- safety practices.

15. Certification

Participants completing the course shall receive:
- Continuing Professional Development (CPD) certification;
- formal recognition of participation.

16. Legal and Professional Compliance

The course shall comply with:
- UK GDPR;
- Data Protection Act 2018;
- Health and Safety legislation;
- applicable professional regulatory standards.

17. Conflicts of Interest

17.1 Declaration
All faculty shall declare potential conflicts of interest.

17.2 Management
The Course Director shall review declarations and ensure transparency and protection of educational integrity.

18. Data Protection and Confidentiality

Personal data shall be:
- processed lawfully and securely;
- used only for course administration and evaluation;
- not disclosed without consent unless required by law.

Participants shall maintain confidentiality of any clinical discussions.

19. Document Control and Review

- This document shall be reviewed annually.
- Responsibility lies with the Course Director and the AAG.
- All revisions shall be version-controlled and documented.

20. Declaration

The ESSPAS course operates within a formal governance framework designed to:
- ensure high academic standards;
- promote safe procedural practice;
- support early-stage surgical training;
- maintain regulatory and professional compliance.

Appendix A: Terms of Reference (ToR)

Academic Advisory Group (AAG)

1. Purpose
The Academic Advisory Group (AAG) is established to provide independent academic oversight and strategic guidance for the ESSPAS course.

The AAG ensures that the course maintains:
- academic integrity;
- alignment with current surgical education standards;
- relevance to clinical practice.

2. Authority
The AAG is authorised to:
- review and approve curriculum content;
- make recommendations regarding course development;
- request modifications to course structure or delivery;
- review quality assurance data and outcomes;

- oversee academic standards and integrity.

The AAG operates in an advisory capacity. Final executive authority rests with the Course Director unless otherwise specified.

3. Responsibilities

The AAG shall:
- review curriculum at defined intervals;
- ensure alignment with competency-based surgical education frameworks;
- evaluate participant feedback and quality metrics;
- monitor educational outcomes and standards;
- advise on faculty development and composition;
- review significant incidents where relevant to academic standards;
- support continuous improvement of the course.

4. Membership

4.1 Composition
Membership shall include:
- consultant surgeons;
- academic surgical educators;
- senior clinical trainers;
- experts in medical education.

4.2 Appointment
- Members are appointed by the Course Director.
- Appointments are based on expertise and experience.
- Membership shall be reviewed periodically.

4.3 Term of Membership
- The standard term of membership is three years.
- Members may be reappointed.

5. Chairing
- The AAG shall be chaired by a senior member appointed by the Course Director.
- The Chair is responsible for:
- setting meeting agendas;
- facilitating discussions;
- ensuring decisions are documented.

6. Meetings
- The AAG shall meet at least once annually.
- Additional meetings may be convened as required.

7. Quorum
- A quorum shall be 50% of active members.
- Decisions made without quorum must be ratified at a quorate meeting.

8. Decision-Making
- Decisions shall be made by consensus where possible.
- Where consensus cannot be reached, a majority vote shall apply.
- The Chair holds a casting vote if required.

9. Reporting
The AAG shall:
- provide formal recommendations to the Course Director;
- document meeting outcomes and actions;
- maintain records of decisions and reviews.

10. Conflict of Interest
- Members must declare any conflicts of interest.
- Conflicts shall be recorded and managed appropriately.
- Members may be excluded from discussions where conflicts arise.

11. Confidentiality
- All discussions within the AAG are confidential.
- Documentation shall be securely stored and managed.

12. Review of Terms of Reference
- These Terms of Reference shall be reviewed annually.
- Amendments require approval by the Course Director.