



# 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.