

Cardiothoracic Surgery

This guidance is to help doctors who are applying for entry onto the Specialist Register with a CESR in Cardiothoracic Surgery against the 2014 (updated 2015) CCT curriculum. You will also need to read the [Cardiothoracic Surgery Curriculum documentation](#). If you wish to apply against the 2021 curriculum there is separate guidance for this.

Can I get advice before I submit my application?

You can [contact us](#) and ask to speak to the Specialist Applications team for advice before you apply. You are strongly advised to contact the Joint Committee on Surgical Training (JCST) for guidance **before** you submit an application.

What is the indicative period of training for a Certificate of Completion of Training (CCT) in Cardiothoracic Surgery?

The indicative period of training for a CCT in Cardiothoracic Surgery is eight years and it is very unlikely that you would achieve the competencies required for a CCT in a shorter period of time.

Please see [the Cardiothoracic Surgery Curriculum](#) for a detailed breakdown of the programme structure.

Submitting your evidence

Do not submit original documents.

All your copies, other than qualifications you're getting authenticated **must** be accompanied by a proforma signed by the person who is attesting to the validity and accuracy of your evidence (your verifier). It's very important that you read an explanation of how to do this in our [important notice about evidence](#).

You will also need to submit translations of any documents that are not in English. Please ensure the translations you submit meet our [translation requirements](#).

How much evidence to submit

This guidance on documents to supply is not exhaustive and you may have alternative evidence. We recognise that you may not have all the evidence listed here and you may wish to delay submitting an application until you are able to gather it.

Your evidence **must** cover the knowledge, skills and qualifications to demonstrate the required competencies in all areas of the [Cardiothoracic Surgery Curriculum documentation](#). If evidence is missing from one area of the curriculum for example, then the application may fail.

If you have a piece of evidence that is relevant to more than one sequence, do not include multiple copies in your application. Instead, include one copy and list it in the comments section under each relevant area, stating that the document is located elsewhere. (For example you might state: "document included in teaching and training section".)

A message from the Specialist Advisory Committee (SAC) in Cardiothoracic Surgery

Before making your application for CESR in Cardiothoracic Surgery you are encouraged to review this document in conjunction with the current Cardiothoracic Surgery CCT curriculum its companion document the JCST's [Certification Guidelines for Cardiothoracic Surgery](#), you will need to ensure, through the documentary evidence you provide, that you have demonstrated equivalence to the standards set out in the curriculum. If you don't have the evidence of current competency or you don't present it to us in a way that is conducive to us being able to draw conclusions from your evidence, you will not be successful.

This is a summary of common reasons applications fail:

Knowledge: The standard test of knowledge in the Cardiothoracic Surgery (CTS) CCT curriculum is the Joint Committee on Intercollegiate Examinations (JCIE) Fellowship Examination. A CESR applicant is expected to demonstrate either successful completion of this exam, or alternative evidence that demonstrates equivalent knowledge to someone that has passed the exam.

Skills and Experience: You need to show that you are maintaining your competence across the depth and breadth of the curriculum at the time of application.

The guidance below under the Sequence 6 and 7 clearly sets out how you should present your logbooks and consolidation sheets. It is imperative that you follow this guidance as this will allow the evaluators to assess the information. Failure to follow this guidance may mean we cannot draw definitive conclusions and your application may be unsuccessful.

The CTS curriculum requires exposure to both adult cardiac and thoracic surgery. You must be able to demonstrate that you are keeping your knowledge and skills up-to-date.

You must be able to demonstrate knowledge and understanding of the management of the following critical conditions: (1) aortic dissection, (2) stridor, (3) secondary pneumothorax/tension pneumothorax, (4) cardiac tamponade, (5) acute haemothorax, (6) low cardiac output following cardiac surgery, (7) endocarditis-native or prosthetic valve, (8) respiratory failure following thoracic surgery.

There are indicative numeric requirements for the number of operations performed. This has been agreed as 250 major cases with the majority in the area of special interest (please see Appendix 1 of the Certification Guidelines for CTS).

You should demonstrate broad exposure to operative cardiothoracic surgery. Competency should be demonstrated across a broad range of cardiothoracic procedures as evidenced by completed PBAs.

The WBAs should be completed contemporaneously- retrospective WBAs hold no value.

The SAC recognise that for some doctors, especially those in service posts, it may be difficult to gather this type of evidence. But without this your application won't be successful.

Research and Presentations:

You should provide evidence of

- study of research methodology or possess a higher degree
- four papers published in peer-reviewed journals, two of which should be completed as first author.
- have delivered six presentations at national/international meetings, two of which must have been presented internationally.
- a Good Clinical Practice (GCP) course in Research Governance
- a research methodologies course.

Applicants often fail in this area because they present case reports or abstracts in place of peer reviewed research papers.

Mandatory Courses: You are expected to have completed courses covering the following topics;

- Management in the NHS
- Training the Trainers (or similar)
- Research methodologies
- Good Clinical Practice (GCP)

It is important to show that you have not only attended the relevant course, but how you are using the knowledge and skill in practice.

Educational conferences-you should have attended a major national or international meeting in each of the 6 years prior to your application.

Audit and Governance: You are required to submit evidence of an audit completed within two years prior to your application.

Currency of evidence: Your evaluator will be looking for evidence of current competency. Where you have completed training at some point in the past, it is crucial that you demonstrate that you have maintained competency across the whole area of the curriculum irrespective of whether your career has focused on a particular area of the curriculum or whether you will only be practising in a certain area and will not need other areas of the curriculum.

The points discussed above should not be seen as a definitive list, this is based on the SAC's experience of evaluating CESR applications. It is important that you carefully study the curriculum and associated application guidance before you apply.

It is important to bear in mind that CESR is a paper-based process and therefore they quality and the way you present your evidence is very important. If you do not present the evidence clearly and as set out in this guidance your application is likely to fail.

Anonymising your evidence

It is important that you anonymise your evidence before you submit it to us. You must remove:

- All patient identifying details
- Details of patients' relatives
- Details of colleagues that you have assessed, written a reference for, or who have been involved in a complaint you have submitted.

This includes:

- Names (first and last)
- Addresses
- Contact details such as phone numbers or email addresses
- NHS numbers
- Other individual patient numbers
- GMC numbers

The following details don't need to be anonymised:

- Gender
- Date of birth

It is your responsibility to make sure that your evidence has been anonymised. Evidence which has not been anonymised will be deleted from your application and you'll be asked to reupload it. More information can be found on our [website](#).

Domain 1 - Knowledge, skills and performance

Sequence One

This section is to confirm which curriculum you wish to be assessed against.	Confirm which curriculum year you wish to be assessed against by typing this in the comments box and set this sequence to 'Not Providing evidence'.
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Sequence Two

Curriculum Vitae	Your CV should include the following set out as specified: <ul style="list-style-type: none">• Your posts-in reverse chronological order• Publications-list in reverse chronological order, set out in a way which will easily indicate the authorship, nature of the journal, publication date, abstract or not. You should include the PubMed index reference• Presentations-list in reverse chronological order to include title, author/s date, of presentation, where presented, poster or podium presentation• Audit-list in reverse chronological order to include the date of audit• Courses-list in reverse chronological order to include the date of course. More information on how to present your CV can be found on our website .
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Sequence Three

<p>Employment letters and contracts of employment</p>	<p>The information in these letters and contracts must match your CV. They will confirm the following:</p> <ul style="list-style-type: none"> • dates you were in post • post title, grade, training • type of employment: permanent, fixed term, or part time (including percentage of whole time equivalent)
<p>Job descriptions</p>	<p>These must match the information in your CV. They may provide evidence of</p> <ul style="list-style-type: none"> • your position within the structure of your department • your post title • your clinical and non-clinical commitment • your involvement in teaching or training.
<p>Job plans</p>	<p>Where you have undertaken a number of roles, provide details for each post or role. They may provide evidence of :</p> <ul style="list-style-type: none"> • the main duties and responsibilities of the post • your out of hours responsibilities, including rota commitments • time in clinic • any professional supervision and management of junior medical staff that you have undertaken • your responsibilities for carrying out teaching, examination and accreditation duties • your contribution to postgraduate and continuing medical education activity, locally and nationally • any responsibilities you had that relate to a special interest • requirements to participate in medical audit and in continuing medical education • your involvement in research • your managerial, including budgetary, responsibilities where appropriate • your participation in administration and management duties.
<p>On call rotas</p>	<p>This is important to allow assessment of the amount of nights on call eg 1:3 or 1:8.</p>

Sequence Four

<p>Primary medical qualification (PMQ)</p>	<p>If you hold full registration with us, you do not need to submit your PMQ as we saw it when we assessed your application for registration.</p> <p>If you do not hold registration, you will need to have your primary medical qualification independently verified by ECFMG before we can grant you full registration with a licence to practise.</p> <p>You can find out more about primary source verification on our website.</p> <p>You only need to get your primary medical qualification verified by ECFMG. The rest of your evidence should be verified in line with our guidance.</p>
<p>Specialist medical qualification(s)</p>	<p>Please provide an authenticated copy of any specialist medical qualifications you hold.</p> <p>You must list any failed attempts at examinations relevant to your specialty.</p>
<p>Curriculum or syllabus (if undertaken outside the UK)</p>	<p>This should include the requirements of the qualification and must relate to the specialty in which you are applying.</p> <p>The curriculum or syllabus (including assessment methods) must be the one that was in place when you undertook your training.</p> <p>If a formal curriculum or syllabus (including assessment methods) is not available please provide a letter from the awarding body outlining the content of the training programme or examination.</p> <p>Where you have not provided evidence of success in an examination that is a requirement of the CCT curriculum, evidence in this area may contribute to your demonstration of equivalent knowledge. See sequence 5 below. In this case you should show how</p> <ul style="list-style-type: none"> • the curriculum covers areas of the CCT curriculum • how examinations are evaluated or quality assured (external assessment). <p>The JCST does not hold evidence relating to overseas training programmes and the onus is on the applicant to provide these.</p>
<p>Specialist registration outside the UK</p>	<p>Please provide an authenticated copy of the details of the registration requirements of that authority and your current certificate.</p>

This is the specialty specific guidance for 2014 (updated 2015) CCT curriculum in Cardiothoracic surgery

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Honours and prizes	Please provide copies of certificates or letters showing what the prize or honour was for, including the selection and eligibility criteria and pool of eligible individuals.
Other relevant qualifications and certificates	Please provide copies of certificates. For example: degrees or diplomas in relevant areas such as management, business, IT, communication, education or law.

Sequence Five

Knowledge		
Knowledge	<p>You must demonstrate knowledge to the standard of CCT curriculum. The (The formal test of knowledge required for a CCT is the Joint Committee on Intercollegiate Examinations (JCIE) fellowship Examination). In this case the FRCS (Cardiothoracic Surgery)</p> <p>If you cannot demonstrate success in this exam then other supporting evidence of your knowledge must be very strong indeed.</p> <p>To demonstrate evidence of depth of knowledge you could provide a portfolio to demonstrate appropriate levels of knowledge in Cardiothoracic Surgery. You will be measured against the standards of the CCT curriculum.</p> <p>The following are examples of part of a portfolio to demonstrate knowledge - although it is unlikely that any one thing on their own would do this</p> <ul style="list-style-type: none"> • Pre JCIE versions of the Fellowship of the Royal College of Surgeons (FRCS) – These will show a basic level of knowledge but not specialty specific or current. . The Joint Surgical Colleges Fellowship Examination (JSCFE). This examination is not the test of knowledge set out in the curriculum and on its own does not show knowledge equivalent to the curriculum. • Other examinations including overseas qualifications. You will need to provide certification of success together with details of what the 	<p>FRCS (CTh) certificate- the test required by the curriculum.</p> <p>Or</p> <p>A portfolio of knowledge which shows equivalent knowledge to the curriculum- left hand column gives details</p> <p>If you choose to provide a portfolio of knowledge then you should submit a mapping exercise in this sequence to show how your evidence meets the curriculum requirements for your specialty. You will need to show how the individual elements of your portfolio combine to demonstrate equivalent knowledge across the whole curriculum. If your portfolio includes other qualifications or tests of knowledge then you should supply the relevant syllabus/ curricula and show what the qualification tests and how it tests.</p> <p>You will also need to provide information on standard setting, examiner selection, examiner training, and number of examiners, quality control, and validation of questions. You should provide this in a clear format.</p> <p>If your portfolio includes research then you should submit this under sequence 10 - research. But you must refer clearly in the mapping document to any research they want to be considered towards the knowledge portfolio.</p> <p>Please list unsuccessful attempts at examinations (where you have not subsequently been successful) in the comments for this sequence.</p>

examination covers and to what level. The official curriculum/syllabus could demonstrate this. A certificate of success alone will not show that you currently have the appropriate level of knowledge. Decisions are made on a case by case basis. It is unlikely however that any qualification other than the JCIE exam will show direct equivalence as no other qualification is templated directly to the curriculum. The European Board of Surgery Specialty Exams on their own are not equivalent.

- Research - Recent work published in peer-reviewed journals or presented at national or international meetings will carry more weight.

- Postgraduate degree gained through research - as evidence you should include an authenticated or notarised copy of the certificate. This is unlikely on its own to show sufficient depth and breadth of knowledge as research will be focussed on one area.

- Peer reviewed publications - You should include the whole article. The best evidence will be first name publications in high impact factor peer review journals of work relating to knowledge / skills normally achieved in the last year(s) of the CCT curriculum.

- Presentations at national and international meetings and conferences - You should include a programme detailing the date and title of presentation, when and where presented, any feedback and your role in the work. Include the slides used (with dates) for each presentation.

An evaluation is made based on an applicant's whole career and therefore two applicants with the same

	qualifications, but different training and/or experience, may not receive the same decision.	
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Sequence Six

Consolidation Reports		
<p>Evidence of the depth and breadth of experience defined in the curriculum and its companion document the Certification Guidelines for Cardiothoracic Surgery.</p> <p>The CTS curriculum requires exposure to both adult cardiac and thoracic surgery. You must be able to demonstrate that you are keeping your knowledge and skills up-to-date.</p> <p>You must be able to demonstrate knowledge and understanding of the management of the following critical conditions: (1) aortic dissection, (2) stridor, (3) secondary pneumothorax/tension pneumothorax, (4) cardiac tamponade, (5) acute haemothorax, (6) low cardiac output following cardiac surgery, (7) endocarditis-native or prosthetic valve, (8) respiratory failure following thoracic surgery.</p> <p>There are indicative numeric requirements for the number of operations performed. This has been agreed as 250 major cases with the majority in the area of special interest (please see Appendix 1 of the Certification Guidelines for CTS).</p>	<p>You should provide consolidation reports for the last 6 years. You should provide</p> <ul style="list-style-type: none"> • an operative group over the last 6 years • SAC indicative procedures over the last 6 years <p>All consolidation sheets need to be categorized by your involvement, e.g. assisting, you as the surgeon, assisted by a trainer, etc.</p> <p>All evidence in this area must be anonymised for individual patient data.</p> <p>If you do not provide consolidation sheets in this format then it may not be possible to perform a proper evaluation of your skills and experience. The evaluators will be looking for evidence of your current competence and experience, which is why reports need to cover the last 6 years only. If you provide logbooks for longer, these should be in addition to and separate from the above.</p>	<p>Please upload each consolidation report as a separate upload, ensuring the type and dates of the report are clear e.g:</p> <p><i>SAC indicative group report – Jan 2014-Jan 2020</i></p>

This is the specialty specific guidance for 2014 (updated 2015) CCT curriculum in Cardiothoracic surgery

Please make sure you are reading the latest version. You can find all the guidance you need at www.gmc-uk.org.

Sequence Seven

Logbooks

<p>Evidence of the depth and breadth of experience defined in the curriculum and its companion document the guidelines for CCT – Logbooks</p> <p>The CTS curriculum requires exposure to both adult cardiac and thoracic surgery. You must be able to demonstrate that you are keeping your knowledge and skills up-to-date.</p> <p>You must be able to demonstrate knowledge and understanding of the management of the following critical conditions: (1) aortic dissection, (2) stridor, (3) secondary pneumothorax/tension pneumothorax, (4) cardiac tamponade, (5) acute haemothorax, (6) low cardiac output following cardiac surgery, (7) endocarditis-native or prosthetic valve, (8) respiratory failure following thoracic surgery.</p> <p>There are indicative numeric requirements for the number of operations performed. This has been agreed as 250 major cases with the majority in the area of special interest</p>	<p>You should provide logbooks from the last 6 years. The dates of these logbooks should correspond to the dates of the consolidation sheets above to show your operative experience is current and meets the curriculum requirements.</p> <p>Logbooks should be set out in eLogbook format. If you do not provide logbooks in this format then it may not be possible to perform a proper evaluation of your skills and experience.</p> <p>The evaluators will be looking for evidence of your current competence and experience, which is why logbooks need to cover the last 6 years only. If you provide logbooks for longer these should be in addition to and separate from the above.</p>	<p>Logbooks should be uploaded per institution and named as follows:</p> <p>Institution – time period covered</p> <p>E.g: <i>Stepping Hill – Jan 2016-Jan 2018</i></p>
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This is the specialty specific guidance for 2014 (updated 2015) CCT curriculum in Neurosurgery

Please make sure you are reading the latest version. You can find all the guidance you need at www.gmc-uk.org.

(please see Appendix 1 of the Certification Guidelines for CTS).		
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Sequence Eight

Work Based Assessments (WBAs)		
<p>Evidence of the depth and breadth of experience defined in the curriculum and its companion document the guidelines for CCT - Work based assessments (WBA)s</p>	<p>You should provide WBAs, especially CBDs and PBAs, in the format below, for the main topics and procedures across the full breadth of the curriculum (including elective and emergency surgery and any special interest you may have).</p> <p>The curriculum contains key topics, index procedures and other operations to guide you in what to cover. The CCT Guidelines for Cardiothoracic Surgery detail the types of WPBAs, the procedures these should cover and the numbers required.</p> <p>WBAs should be sufficiently frequent to be able to demonstrate progress and should be undertaken with different assessors in different settings on a variety of patients. WBAs completed retrospectively will hold no weight.</p> <p>It is very important that your WBAs are as meaningful as possible and therefore they should show evidence of feedback and guidance. They should include comments from your assessors and, where appropriate, demonstrate reflection by you. Block entries of 'satisfactory' are not acceptable.</p>	<p>You should demonstrate broad exposure to operative cardiothoracic surgery. Competency should be demonstrated across a broad range of cardiothoracic procedures as evidenced by completed PBAs.</p> <p>You must provide an index of the WBAs so the dates and location of the assessment is clear to your evaluator.</p> <p>You should upload your evidence per institution and grouped as follows:</p> <p><u>PBAs</u> Grouped and named by institution and procedure</p> <p>E.g Stepping Hill – PBA CABG x 2</p> <p>Other types of WBA (CBDs, CEX, DOPS) should be grouped by institution and type, and within that by procedure in date order with the most recent first.</p>

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Sequence Nine

CPD		
<p>CPD record certificates, certificates of attendance, workshops and at local, national and international meetings or conferences, memberships of professional bodies and organisations</p> <p>Additional courses / qualifications - evidence of having attended specific courses/gained specific qualifications as defined in the curriculum</p>	<p>You should provide a variety of CPD to cover all aspects of your work and to demonstrate the breadth of your practice. Where you have specialized, evidence of CPD records covering the other aspects of the relevant curriculum is important to demonstrate the maintenance of your skills.</p> <p>Please provide details of the events you have attended describing the content. Support this with documentary evidence of your attendance (such as CPD certificates).</p> <p>The Certification Guidelines require the following</p> <ul style="list-style-type: none"> • Management in the NHS 1 • Training the Trainers (or similar) • Research methodologies • Good Clinical Practice (GCP) <p>It is important to show that you have not only attended the relevant course, but how you are using the knowledge and skill in practice.</p>	<p>Please upload all mandatory courses as follows:</p> <p>ATLS, Training the Trainer, Leadership, Management in the NHS¹, Good Clinical Practice in Research and Research Methodologies in one document.</p> <p>Speciality Specific courses in one document</p> <p>All other CPD activities should be uploaded as one document per year.</p>
<p>Specialist conferences - evidence of having attended conferences and meetings as defined in the CTh curriculum and Certification Guidelines.</p>	<p>Applicants should provide evidence of having attended a major national or international meeting in each of the 6 years prior to your application.(e.g. annual meetings of specialty associations or major international equivalents).</p>	<p>Evidence of having attended a major national or international meeting in each of the 6 years prior to your application.(e.g. annual meetings of specialty associations or major international equivalents).</p> <p>As evidence you should provide certificates of attendance</p>

¹ Courses on health service management and leadership. By health service management we mean management in the UK Health services. One course could satisfy the requirements for management and research provided the course gives evidence of both leadership and specific management in the UK health services. You should provide evidence of the course content.

Sequence 10

Research		
<p>Research – Applicants must provide evidence of having met the relevant requirements of the curriculum</p>	<p>You should provide evidence of</p> <ul style="list-style-type: none"> • study of research methodology or possess a higher degree • four papers published in peer-reviewed journals, two of which should be completed as first author. • have delivered six presentations at national/international meetings, two of which must have been presented internationally. • a Good Clinical Practice (GCP) course in Research Governance (submit under sequence 9 CPD) • a research methodologies course (submit under sequence 9 CPD) 	<p>Publications</p> <p>You should provide evidence of the whole paper. More weight is given where:</p> <ul style="list-style-type: none"> • you are first-author • the publication has a high impact factor <p>You must not change the listing of the authors (the order in which the authors are listed).</p> <p>Individual papers should be uploaded with the following description:</p> <p>Authorship – nature of the journal – publication date – paper description i.e abstract² or not. You should also include the PubMed index reference.</p> <p>E.g <i>1st author – International Journal of Surgery – Feb 2018 – abstract</i></p> <p>You should upload your publications in reverse chronological order (most recent first) and you should provide a list of your publications. Publications should also be listed in reverse chronological order in your CV.</p> <p>Presentations</p> <p>You should upload all documents relating to one presentation together (e.g Invitation to speak, event programme and copy of presentation) with a clear description:</p> <p>E.g <i>Poster presentation – SCTS annual congress – 2019 – Main presenter</i></p> <p>You should upload your evidence of presentations in reverse chronological order (most recent first) and you should provide a list of your publications.</p>

² You should be providing the whole publication- an abstract does not provide enough information

		<p>Presentations should also be listed in reverse chronological order in your CV.</p> <p>Note: where you have not provided evidence of success in an examination that is a requirement of the CCT curriculum, evidence in this area, particularly publications may contribute to your demonstration of equivalent knowledge.</p>
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Sequence 11

Teaching, Training, Assessing and Appraising

<p>Medical Education and training - evidence of an understanding of, and participation in, medical education and training as defined in the curriculum.</p>	<p>Applicants must have attended a 'Training the Trainers' course, or equivalent. This should show recent competency.</p> <p>An equivalent course to Training the Trainers course would be one covering educational theory underpinning adult learning, application to surgery, teaching methods, assessment principles.</p> <p>You must provide</p> <ul style="list-style-type: none"> ● Training the trainers course or equivalent (Please submit this with your mandatory courses under sequence 9 CPD) ● A variety of written structured feedback from those taught (ie from different sessions, mixture of individual / course feedback) ● 3 examples of Teaching timetables showing the frequency of teaching ● 3 examples of lecture slides ● Evidence of carrying out assessment and appraisal of junior colleagues-this could include assessing WBAS, taking part in appointment. <p>You may also wish to provide the WBA Observation of Teaching-OoT</p>	<p>Please group and upload evidence by teaching activity with a clear description:</p> <p><i>E.g Stepping Hill – Foundation doctor training – Presentation, feedback and timetable – 2018</i></p>
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Domain 2 – Safety and Quality

Sequence 12

Quality Improvement		
<p>Quality Improvement - evidence of an understanding of, and participation in, audit or service improvement as defined in the curriculum</p>	<p>You are required to submit evidence of an audit completed within two years prior to your application.</p> <p>Evidence to submit in this section could include:</p> <ul style="list-style-type: none">• presentation slides• Audit reports• Presentations of audit work• a publication coming out of audit may provide evidence- but only if it shows the applicant's role in the audit clearly. <p>You may wish to supplement your evidence with the following</p> <ul style="list-style-type: none">• AoA	<p>Please group and upload evidence by audit activity with a clear description:</p> <p>E.g <i>Stepping Hill – Audit and re-audit of xxxxxxxx clinic – 2016-2017 – audit lead</i></p> <p>You should provide your audits in reverse chronological order Audits should also be listed in reverse chronological order in your CV.</p>

Sequence 13

Management and Leadership		
<p>Management and leadership - evidence of an understanding of management structures and challenges of the health service in the training jurisdiction</p>	<p>Applicants must have completed</p> <ul style="list-style-type: none"> • a course on health service management and • provide evidence of having taken part in a management related activity, and • evidence of leadership. 	<ul style="list-style-type: none"> • Course on health service management. By health service management we mean management in the UK Health services. The course should provide you with an understanding of management structures and challenges of the NHS. You should provide evidence of the course content. You should provide evidence of the course content. This evidence should be submitted in mandatory courses under sequence 9 - CPD. • provide evidence of having taken part in a management related activity e.g. rota administration, trainee representative, membership of working party etc. or of having shadowed a management role within the trust. • Provide evidence of being a positive role-model & leader eg. initiating or leading on projects, chairing meetings • Reflection on management and leadership activities-see GMC Guidance. <p>The Academy and COPMeD Reflective Practice Toolkit gives advice about reflection https://www.jcst.org/-/media/files/jcst/key-documents/reflective-practice-toolkit-aomrc-copmed.pdf</p>

Sequence 14

Governance		
<p>Service improvement and governance</p>	<p>Exposure to management issues, contract issues, rotas and budgeting for a department.</p>	<p>. Evidence of</p> <ul style="list-style-type: none"> • participation in service improvement meetings, multi-disciplinary team meetings (MDTs), clinical governance meetings. The evidence should show the role you played in these meetings, examples of evidence could be meeting invitations, agendas, minutes. • attendance at Clinical Governance courses (this could be covered by the management in the NHS course described in sequence 9-CPD; • knowledge of governance in the UK Health Services. • budgetary activities • organisation of rotas and work schedules • acting as a trainee representative • membership of working party. <p>It is very important that you provide evidence which shows your involvement in governance and service improvement and makes your role clear.</p>

Sequence 15

Taking part in appraisal		
Appraisal and PDP and MSF	Evidence of taking part in appraisal, including satisfactory MSF,360 feedback	<p>At least 3 recent (within the last 5 years) cycles of appraisal to include the PDP including most recent. Please group appraisal chronologically and by institution</p> <p>At least one MSF from within the last 5 years</p> <p>360 feedback</p>

Sequence 16

Monitoring risks to safety		
Health and safety	You need to provide evidence to show that you are aware of and follow Health and Safety requirements.	<ul style="list-style-type: none"> • attendance at /taking part in online appropriate courses (e.g. infection control, safeguarding vulnerable adults, safeguarding vulnerable children)- a copy of the Trust mandatory training record showing relevant courses may suffice <p>The following may also provide evidence:</p> <ul style="list-style-type: none"> • involvement in infection control (e.g. membership of committees) • audit on infections and subsequent changes in activity • creating guidance to protect patient safety and putting that guidance in place
Own Health		
Evidence of your own health	Evidence of your own health	<p>Please provide evidence of your own health:</p> <ul style="list-style-type: none"> • immunisation records • health records.

Domain 3 – Communication, Partnership and Teamwork

Sequence 17

<p>Evidence that you can communicate effectively with patients and build effective relationships with patients and families.</p> <p>Evidence that you can build partnerships and work well in a team with colleagues in both clinical and management situations.</p> <p>Evidence of partnerships with patients and evidence of obtaining consent</p>	<ul style="list-style-type: none"> • Evidence of relevant courses in particular consent, patient confidentiality; data protection and information governance; equality and diversity • Referral letters – no more than 2 or 3 are required • Discharge summaries • Communications with patients • Communications with colleagues • Correspondence with colleagues demonstrating collaboration over management of patient care across multidisciplinary teams • Examples of complaints handling • Evidence of reflection-reflective notes and diaries. The Academy and COPMeD Reflective Practice Toolkit gives advice about reflection <p>https://www.jcst.org/-/media/files/jcst/key-documents/reflective-practice--toolkit-aomrc-copmed.pdf</p> <p>Structured reports, testimonials and recommendations will also be considered when assessing this area of your application.</p>	<p>Evidence in this section may relate to several descriptors and you do not need to provide it more than once. If you have already provided the evidence please note in the 'Details of what I'm providing' part of your application you are cross-referencing</p> <p>Please group evidence by institution and type in this section:</p> <p><i>E.g Stepping Hill – Referral letters</i></p>
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Domain 4 – Maintaining Trust

Sequence 18

<p>Respect for patients</p> <p>Treating people fairly</p> <p>Demonstrate that you act with honesty and integrity.</p>	<ul style="list-style-type: none"> • Thank you letters/cards from patients and colleagues – no more than 5 examples are needed • 360° appraisal and multisource feedback • Equality and diversity training. • Reflective notes • Examples of complaints handling • Course certificates including patient confidentiality; data protection and information governance; equality and diversity • details of gaining ethics committee approval • Having no restrictions on your registration (UK-based doctors). • Certificate of Good Standing (overseas-based doctors). 	<p>Evidence in this section may relate to several descriptors and you do not need to provide it more than once. If you have already provided the evidence please note in the 'Details of what I'm providing' part of your application you are cross-referencing</p> <p>Please group evidence by institution and type in this section:</p> <p>E.g <i>Stepping Hill – Reflective notes</i></p>
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Sequence 19-27

<p>These sections of the online application form are for applicants applying under the 2021 CCT curriculum.</p> <p>As you're applying under the 2014 (updated 2015) CCT curriculum this evidence is not required for your application</p>	<p>Please set these sections of the application to 'Not submitting evidence'</p>
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This is the specialty specific guidance for 2014 (updated 2015) CCT curriculum in Cardiothoracic surgery

Please make sure you are reading the latest version. You can find all the guidance you need at www.gmc-uk.org.