

Report 3 – The National Blueprint for Orthopaedic Surgical Delivery in Wales

ANNEX 12

Welsh Trainee Survey

1. Introduction

Currently the Trauma and Orthopaedic services in Wales hosts 50 trainee surgeons on the CCT/fellowship programme. A survey of trainees was undertaken to map out intention to remain in Wales post-training and to gain insight into areas that attract trainees and those which require attention. The importance of orthopaedic trainees both in respect of current, and future service provision cannot be underestimated. Trainees form a core part of the wider orthopaedic on-call team and reduction in numbers or reduction in quality will be detrimental going forward. The current trainees are the consultant workforce of the future and a loss of status to the Welsh training program will also be detrimental for long term recruitment and retention in respect of the consultant workforce. To date, the training deaneries have been pragmatic with regards to the effect of the pandemic on quality of training, however with faster paced recovery and more coherent recovery plans occurring in NHSE, there is a real threat that training number to Wales will be reduced in future; **this will be catastrophic for Wales.**

The survey was conducted by a Trainee to support anonymity and promote candid responses. 31 responses were received: a response rate of 62%.

2. Responses

2.1. Training profile

The trainee profile (fig1) shows that there was a reduction in trainee numbers starting in 2020 and currently working to ST4 level as compared to previous years. This has the potential to impact the workforce in future years. This disruption in training numbers needs to be taken into account during workforce planning nationally.

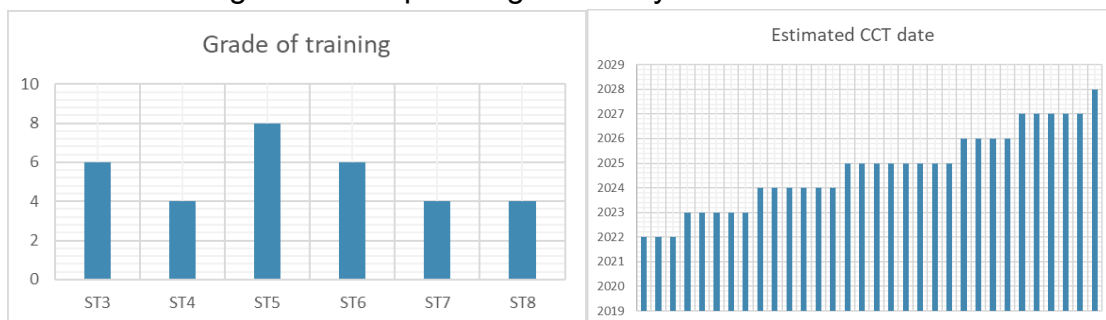
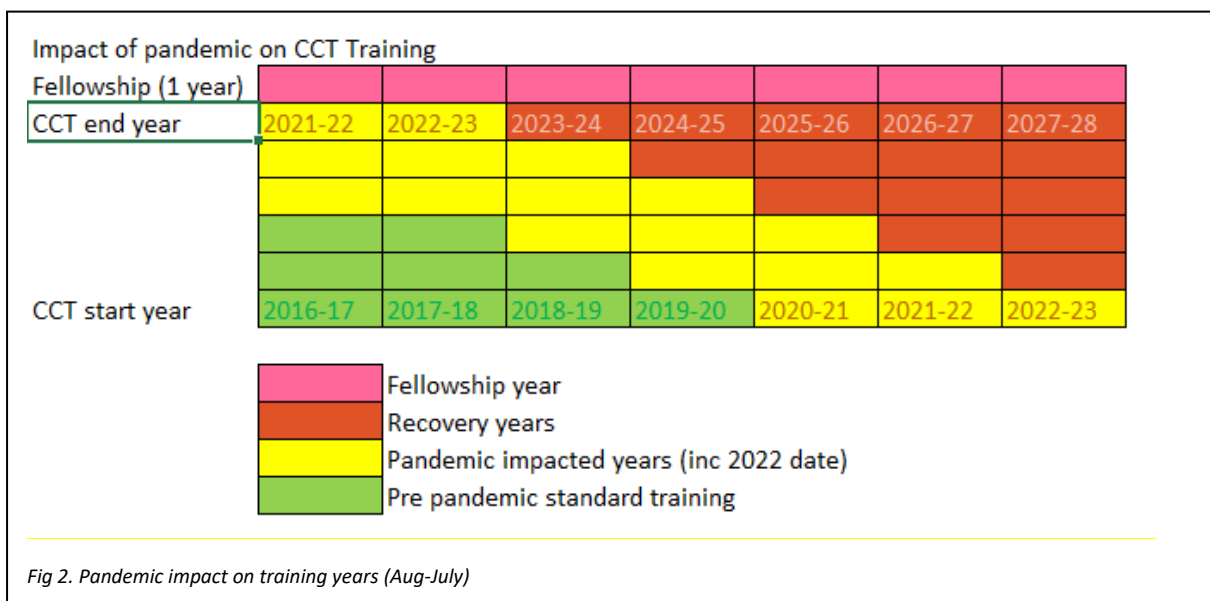


Fig 1. Number of HEIW Orthopaedic higher surgical trainees 2022 and CCT date.

2.2. Impact of pandemic on training

It is acknowledged that the pandemic and lack of surgical activity has impacted the quality and depth of training that current trainees have experienced. Fig 2 shows the impact on the training profile. The recovery years are crucial to consider in order to ensure that conscious plans are developed nationally to provide training. A significant proportion of trainees and fellows will not have experienced normal orthopaedic service delivery. Failure to rectify this at pace will make Wales an unattractive place to train in the future.



2.3. Intended areas of specialisation

Of those currently in training there is a wide spread of interest in sub-specialities. The survey allowed for multiple responses to reflect future roles and show knee (46% of respondents) and hip (38%) to be most popular, followed by hand & wrist (19%) and trauma (19%). Full results are shown in Fig 3.

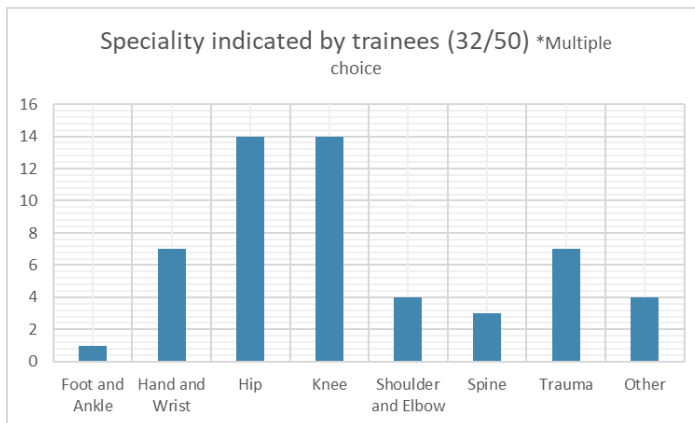


Fig 3. Subspecialty preferences

The low numbers of trainees declaring an interest in foot and ankle and shoulder and elbow must be monitored. It is vital to continue to collect intelligence on future intentions in order to support national workforce planning and to create a transparent conversation with trainees regarding potential for consultant recruitment in Wales. This can only be achieved by a formalised Welsh Orthopaedic Network (WON).

2.4. Post fellowship preferred location

Of the 32 respondents, 87% reported the intention to remain in Wales post-fellowship.

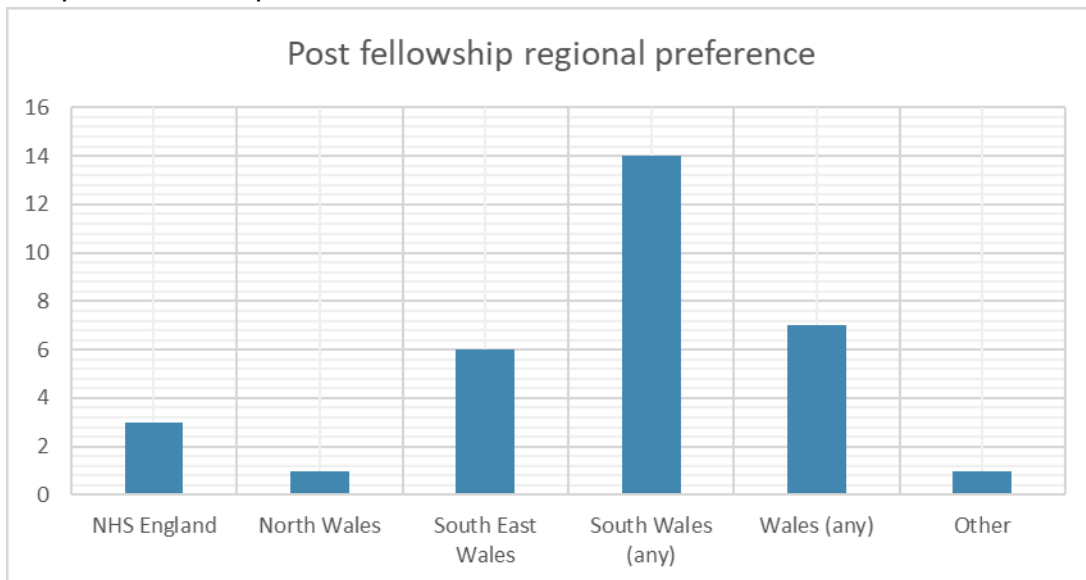


Fig 4. Post fellowship regional preferences

2.5. Reasons for leaving Wales

Of the 13% who stated that they intend to leave Wales, a number of reasons were outlined, as shown in Fig 5.

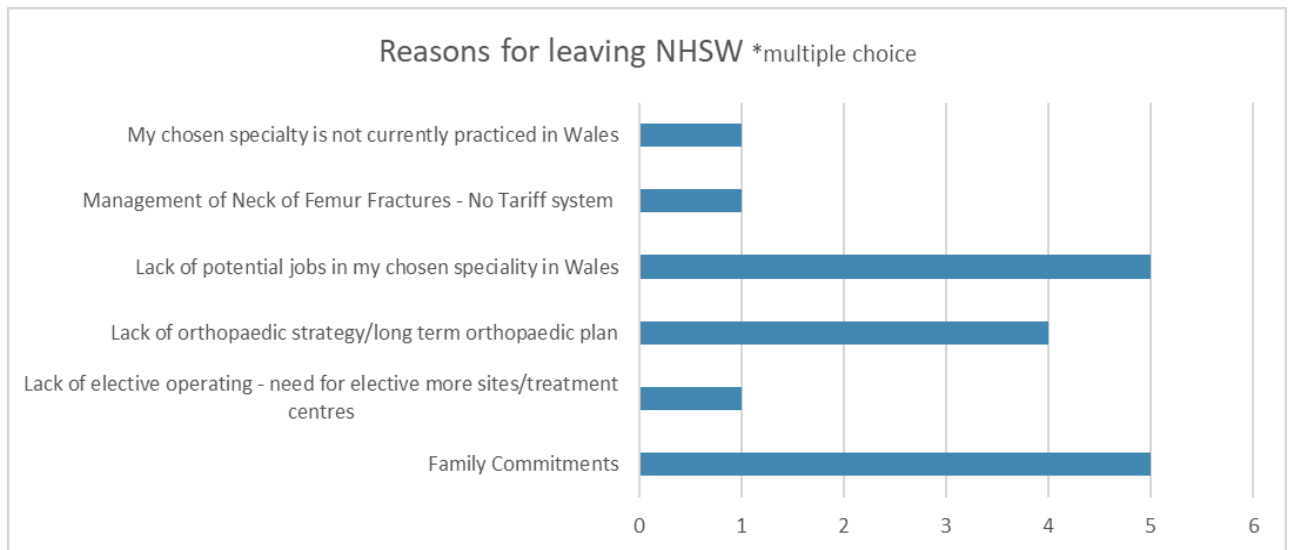


Fig 5. Reasons for considering leaving NHSW

The lack of a direction for orthopaedics and lack of elective operating are important reasons which can be mitigated by the recommendations of the NCSOS team.

2.6. Advantages of training in Wales

The quality of teaching in Wales was seen as the major advantage of training in Wales – however this is the very area in which training has been impacted by the pandemic and the failure to protect elective orthopaedic surgery. Alongside this, the variety of hospital environments (tertiary, DGH) is also seen as an advantage.

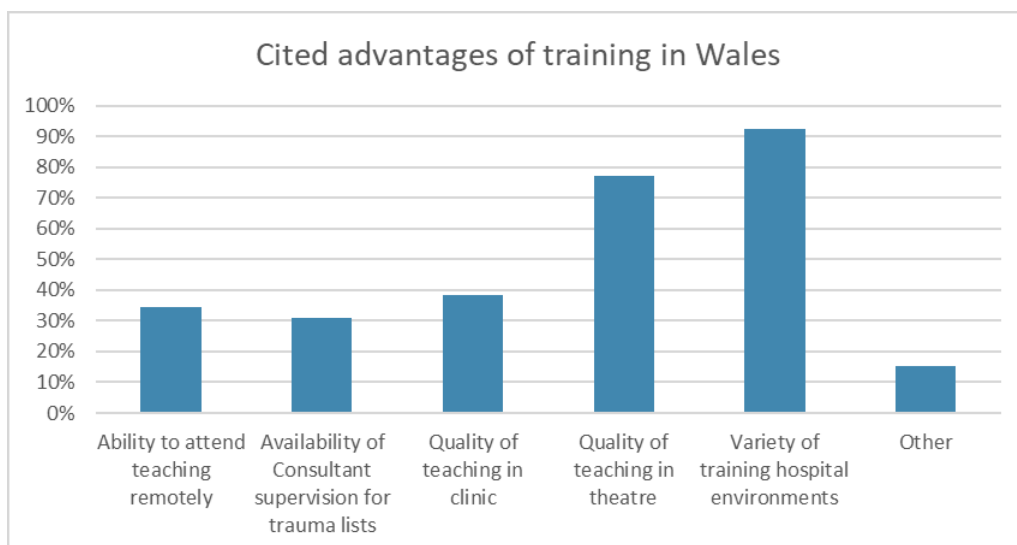


Fig 6. Stated advantages of training in Wales.

Other advantages included: a supportive training environment with supporting colleagues and consultants that respond to professional and personal circumstances, and lower cost of living/ house prices. The responses clearly outline the benefits of the Welsh training program from a trainee perspective which is at serious risk without re-start of elective surgery at pace or a structured long term blueprint managed by a WON.

2.7. Improvements to the training programme

When asked to outline any improvements that should be considered the following areas were highlighted

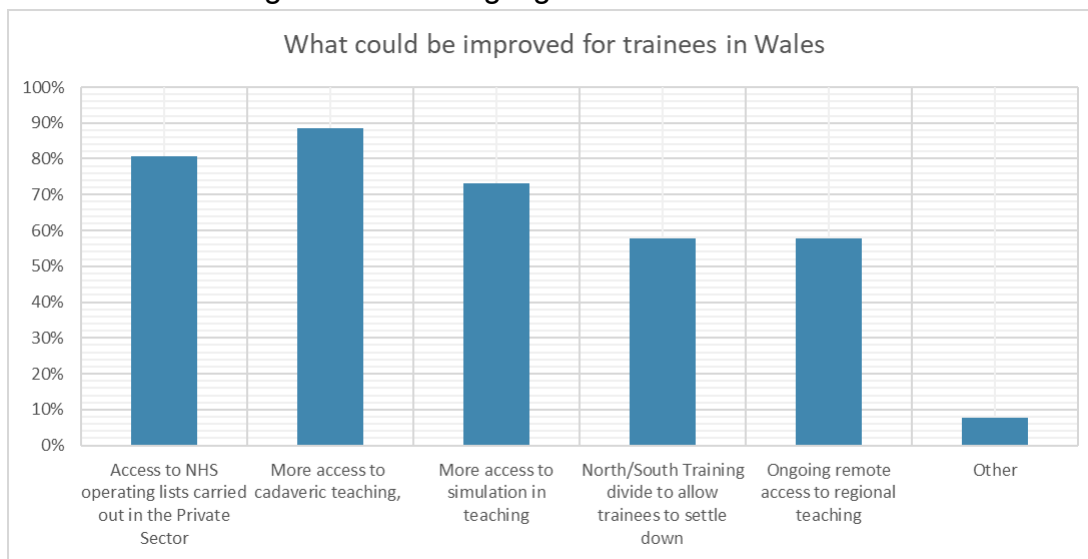


Fig 7. Suggested improvements to the Welsh training programme

Developments in cadaveric training and simulation were highlighted, as was the consideration of North/South placements to allow for consistency in base. Access to supporting NHS operating lists undertaken in the private sector was also a popular response.

It was stated that the geography and expense of the training programme meant that the support expenses of a maximum of £3000 per year was not sufficient to support travel or concurrent rental agreements, which presented a challenge.

2.8. 10 year developments

As part of the consultant workforce of the future, trainees were asked to outline the key improvements that needed to be undertaken in the next 10 years to support orthopaedics. They responded as outlined in Fig 8.

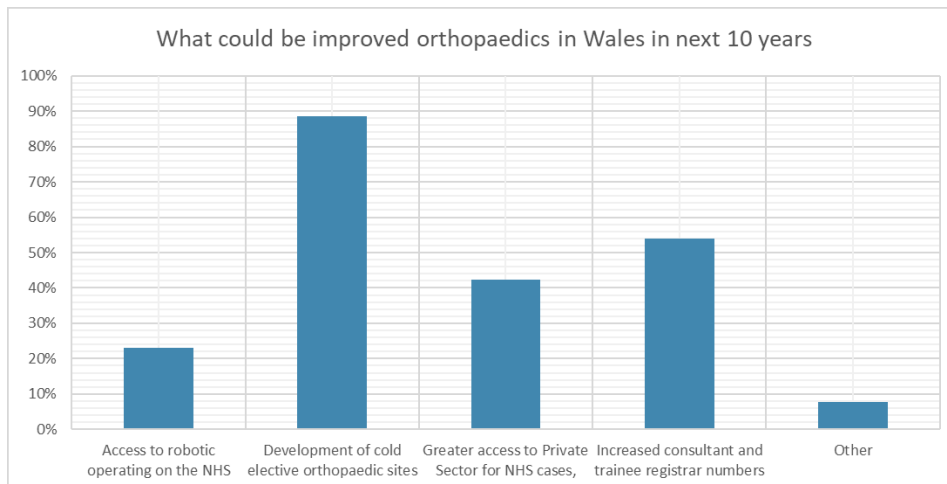


Fig 8. Trainee-suggested improvements to Orthopaedic services in Wales on horizon scanning

The development of cold orthopaedic sites and increased consultant and trainee numbers were the most popular suggestions for long-term developments.

3. Summary

The trainee survey clearly indicates that the Welsh training programme remains a popular high-quality programme, however, the reputation of the programme is being undermined by:

- failure to protect elective orthopaedic capacity
- lack of long-term strategy
- failure to consider options for training in the private sector and over-reliance on outsourcing

Monitoring of sub-specialty interests within the existing training programme should be undertaken annually and linked to existing consultant workforce and horizon scans, so that any deficiencies can be mitigated. This can only be effectively managed by a WON.

Unless these issues are addressed, current service provision and recruitment and retention of future consultant workforce, and therefore future service provision will be detrimentally affected.