

# CESR in Urology

Getting It Right First Time -- GIRFT

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# How did it Start ??

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- NTN – Lack of Settlement Visa (2014)
- CESR vs NTN (after few years of Service Jobs)
- ISCP --- Started my Journey (**5** years till the submission)
- If I can go back in time, ...

# GIRFT

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- Not Easy but Very Doable
- Dedication, Clear Plan, Creating your own Portfolio
- Daily Recording (The Key)
- Think about it Daily

# Make Sure

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- Read the Specific Guidance + Curriculum
- Get all of your evidences ready before applying
- Cross Reference the evidences
- Follow the GMC Good Medical Practice : Equal Importance to all the domains

# What Mistakes Have I done ??

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- Paed/ Andro/ Female
- Previous Candidates
- CESR Courses
- Huge Application

# How to Fail ?

- Lack of enough Evidence
- Lack of enough WBAs
- Lack of Audits
- Lack of Research
- Concentrating on one area
- Lack of Managerial Activities

# TIPs and TRICKs

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- ❖ Follow the CV Template ,,, Employment Letters ,,, Job Description ,,, On Call Rota
- ❖ Any Degrees: MSc, PhD, FEBU, .. + **FRCS Urol**
- ❖ Consultant Certificate from different country (attach the curriculum/academic profile)
- ❖ Good Standing Certificate from different country
- ❖ Appraisals & Appraiser Role

# (WBA)s: ISCP – The Key

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- ❖ 40/ year – minimum 200 in the application
- ❖ More PBAs (60%) : at least 3 consultants, 3 different settings  
  
((showing progression over years))
- ❖ Triangulation
- ❖ Cover all aspects (Emergency/ Elective/ Subspecialties)
- ❖ Group the files as per the Institutions & Subspecialties
- ❖ Indexed Report



# Others

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## Other areas of ISCP:

- ❖ Learning Agreement/ PDP
- ❖ Audits / AOA
- ❖ Courses
- ❖ Conferences
- ❖ Presentations
- ❖ MSF
- ❖ Publications
- ❖ Pt feedback
- ❖ Teaching/ OOT, PDPs and Rota

Paediatric **pdf** file

Sessions, MDTs, Clinics, ISCP, e-logbook and any courses/conferences

# e-Logbook (6 Years)

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- Indicative Numbers : Don't stick to the indicative numbers
- Write a bit about the surgeries (how many grams resected,..etc)
- Day to day filling – will be triangulated to your ISCP
- Be aware with your deficiencies and work on them – Remember you need a Senior in the room
- Dont underestimate any type of surgery; **Emergencies**  
SPC, Priapism, Emergency Stenting, Washout, Scrotal Explorations,..
- Separate the e-logbook (as per the hospital **and** as per the type of procedure)

# CPDs

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- Mandatory Courses:

- ❖ Management in the NHS
- ❖ Leadership
- ❖ Training the Trainer
- ❖ Good Clinical Practice in Research // needs renewal every 2 years
- ❖ Research Methodologies

- +/- : I do advise

- ❖ Urodynamics course
- ❖ Paediatric Urology course
- ❖ Spinal injuries course
- ❖ Emergency Urology course

Conferences

# Research (Failing Point)

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- Pay extra care please!!
- Research Courses, Research Degrees, Research involvement: primary and secondary, Research Activities (Reviewer, Invitations...etc)
- Remember : Nice to have it in High Impact Factor Journal (**Not Mandatory** – Just peer reviewed J.)
- Presentations: Regional, National and International (Can be Audits as well) \*\* Get your Senior to comment on this in ISCP

# Teaching Training Assessing & Appraising

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- Organise Teaching Sessions as many as you can (all different levels)
- Make Sure you have enough Evidences, Feedback Forms, Individual Letters, Presentations & Observation of Teaching
- Courses: Training the Trainer, Teaching Diploma, ...etc
- Triangulate every evidence in one file : Slides, Feedback, Timetable ++ OOT

# Quality Improvement

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- > 3 Audits , > 1 Completed Cycle, Prove the Service Improvement
- Attach the Emails, Registration forms, Slides, Outcome and Certificates – in one file
- Try to publish, present: Regionally, nationally or Internationally
- You need to be the First Author or the **Lead**
- AOA (ISCP)

# Management and Leadership

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- ❖ Courses ; join as many as you can
- ❖ Examples of Activities: Rota Master, Appointment, Emergency Cover Emails, Creating Clinics, Pathways and Local Guidelines
- ❖ Leadership Examples: NOT EASY – Create Few; record on ISCP and get some feedback on them
- ❖ Create one file for every example: Organisation, Activity & Senior Feedback

# Clinical Governance

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- Courses
- M/M
- Monthly Meetings, Recording the minutes, have a copy of the registration showing your regular attendance and participation + the agenda
- Benign X-Rays Meetings, MDTs- Attendance (You can get a letter from the co-ordinator)



# Communication, Partnership and Teamwork

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- Courses: Advanced Communication, Data Protection, Equality/Diversity and Human Factors
- Referral Letters (Try the difficult scenarios) ; MDT Outcomes & Patient Communications'
- Examples of complaints handling

**\*\*Remember that you can crossover References\*\***

# Verifiers and Referees

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- Make sure you make everything accurate from the start for the verifiers
- Make sure you select your Referees; speak to them first, warn them that the structured references are a bit long/exhaustive
- Get more than 4 Referees; including: CSL, Consultant Urologists +/- Consultant Anaesthetist

# Take Home Message

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- GIRFT is really doable
- Create your own portfolio and look after it on a daily basis
- Think about your application as if you are sitting in the committee evaluating it and find the problems before submission
- 5 years of active & continuous work should get you on the register
- Contact me anytime; [Abdalla.Deb@nhs.scot](mailto:Abdalla.Deb@nhs.scot)

Thank you

# Questions?



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