



Surgical assistants College position statement

The College recognises that a significant contribution to health services has been achieved through the development of the roles of practitioners who undertake duties that have traditionally been carried out by medical staff. The College supports these roles within the surgical team which have become critical to the delivery of surgical services in some specialties. The College recognised this by contributing to the development of training curricula for these practitioners with the Department of Health in 2006.

The College believes that the wide range of titles in use for practitioners who assist surgery, including for example surgical assistant, surgical care practitioner, medical care practitioner, surgeon's assistant, and advanced scrub practitioner, is a patient safety issue because it can cause confusion for patients and clinical staff. The public must be fully informed about the background and meaning of the various job titles currently in use within the surgical healthcare setting¹. The College therefore calls for greater clarity in the roles and related competency requirements for healthcare professionals who assist surgery.

The College expects surgical assistance to be carried out by surgeons-in-training wherever possible. If this cannot be a doctor we expect the role to be filled by a trained nurse or registered allied health professional. Whilst recognising that assistance by a surgeon-in-training is not possible all the time priority and opportunities for training must be given to surgeons-in-training particularly when undertaking interventional procedures.

The College believes that full training for those who assist surgery is essential, and that quality assured competencies and accreditation must be mandatory when developing multidisciplinary surgical teams.

The work of surgical assistants must be properly supervised, monitored and appraised, and must involve surgeons from the relevant departments. Surgical assistants – as with all members for the surgical team - must not work outside their sphere of competence and training. Extending practice beyond the defined clinical remit poses risks to patient safety.

Consultant surgeons must have sufficient time to supervise surgeons-in-training as well as the surgical assistants who are clinically accountable to them. The College believes strongly that surgical assistants should not operate independently (unsupervised) under any circumstance.

Trusts must ensure that all members of the surgical team are aware of their role and clinical remit, the training this requires, and their regulatory accountability.

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¹ RCS position statement: 'Surgical titles in the NHS' July 2010:
http://www.rcseng.ac.uk/new_rcseng/content/publications/docs/surgical-titles-in-the-nhs-position-statement