questionnaire which examined three domains: quality of the consultation, user-friendliness of the system and overall satisfaction. The clinical team completed a four item questionnaire. Both questionnaires used a standard five-point Likert type scale (1 strongly disagree – 5 strongly agree).

Results: Median patient scores for the domains of quality of consultation were 5, user-friendliness of the system were 5 and overall patient satisfaction were 5. Patients felt that confidentiality was assured and that the consultation was effective. Median staff scores assessing effectiveness, review length and outcomes were 5.

Discussion: This demonstrates high patient and staff satisfaction with bariatric surgical follow-up utilising remote videoconferencing, suggesting similar satisfaction compared to conventional clinical review. There were no clinical or technical problems with the system. Geographically remote specialist bariatric consultation facilitates easier access to services and offers potential cost savings.

CLINICAL APTITUDE OF MAXILLOFACIAL SHOs IN THE UK, 2009–2010

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Introduction: With foundation training being extended to the dental specialties, this audit reviews the skill mix of the current cohort of maxillofacial surgery SHOs and their competencies.

Material/Methods: Currently, 402 maxillofacial posts exist in the UK. Each unit was contacted and a online questionnaire was distributed to all maxillofacial SHOs currently in post. A second round of questionnaires was subsequently distributed by post.

Results: 74% of current maxillofacial SHOs feel inexperienced to undertake posts. They feel poorly prepared to perform complex dental procedures such as difficult extractions and undertake common medical procedures such as venepuncture. While 67% of respondents felt dentally qualified SHOs could manage inpatients with medical issues, 94% felt they would be better managed by medically qualified personnel. The assessment of acute maxillofacial trauma by SHOs is also a source of concern, along with the management of inpatients with medical issues.

Conclusions: Current undergraduate dental training, European Working Time Directives and dental foundation training programmes are changing the skill base of personnel applying to undertake maxillofacial SHO posts. This places a greater demand on senior clinicians to provide advice and first line management for both inpatients and outpatients requiring maxillofacial and medical interventions. This will also change the requirements for teaching of such personnel and service provision.

DISSECTING OUT EXCELLENCE IN SURGICAL TRAINING: REVIEWING 10-YEARS OF SILVER SCALPEL AWARD NOMINATIONS

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Introduction: Ten years ago this year the Silver Scalpel Award was created to recognise Consultants consistently delivering excellence in surgical training. Awarded across all nine specialties, it is the most notable award for excellence in training. This study investigates the attributes of those nominated.

Methods: A retrospective review of nominations for all short-listed trainers was undertaken. Original trainee nominations were assessed for key attributes by thematic analysis of leadership skills, resourcefulness, training and development, professionalism, and communication skills.

Results: The most frequently cited attributes in each domain were identified. Leadership skills included: accessible, enthusiastic and approachable. Resourcefulness included: tailoring training to individual requirements, good time management and being flexible. Training and development included: setting aims and objectives, punctuality and delegating cases/work appropriate to trainees level of learning. Professionalism included: handling pressure well, being a good role model and time keeping. Communication skills included: being a good listener, polite and a clear communicator.

Conclusions: Silver Scalpel nominees form a population of trainers identified as excellent by trainees. This study identifies key characteristics that set this group apart. The findings will be of use in training future surgical trainers, and are attributes to be considered in those taking on surgical training roles.

THE IMPACT OF BARIATRIC SURGERY ON HEALTH RELATED QUALITY OF LIFE

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Background: Obesity can have adverse affects on health related quality of life. Bariatric surgery has shown to be effective in achieving weight loss and curing or improving obesity comorbidities with the potential to reverse impairments in health related quality of life. The authors carried out a prospective longitudinal study to examine the effects of bariatric surgery on health related quality of life.

Methods: 55 consecutive obese patients with a body mass index (BMI) of 35 to 72 kg/m2 underwent bariatric surgery. Changes in health related quality of life were assessed using the SF-36 Health Survey. The health survey was administered once at the time of referral, and a second time at one year after surgery.

Results: Median age was 41, 74% were females. Median BMI was 51. Health related quality of life was generally poor in severely and morbidly obese patients. The impaired preoperative health related quality of life scores considerably improved with weight loss after bariatric surgery across all domains. The most noticeable improvements were seen in the domains of physical health and general health.

Conclusions: Health related quality of life in the severely obese and morbidly obese patients considerably improved at one year after bariatric surgery.

EVIDENCE-BASED SURGERY – DO WE PRACTICE WHAT WE PREACH?

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Aims: We sought to assess whether clinical recommendations made by surgical units are followed within their own department.

Methods: We carried out a prospective study of the British Journal of Surgery and contacted individual departments to assess whether recommendations made by the senior author were being followed. Journal articles between January 2005 and December 2006 were reviewed with respect to any recommendations made from research findings. Individual departments were contacted by telephone and an appropriate healthcare professional was asked whether the recommendations were being followed by the lead author.