logbook numbers and ARCP outcomes were compared between pre-COVID dates. Effect sizes are reported as incident rate ratios (IRR) with 95% confidence intervals (CI).

Results: 5599 surgical trainees in 2019 and 5310 in 2020 in surgical specialty training were included. The IRR was reduced across all subspecialties because of the COVID-19 pandemic (0.55; 95% CI 0.53-0.57). Elective surgery (0.60; 95% CI 0.59-0.61) was affected more than emergency surgery (0.88; 95% CI 0.86-0.89). Regional variance with reduced operative activity was demonstrated across all specialities. 1 in 8 in their final year of training have not been able to achieve curriculum requirements and have had training extended. 1 in 4 trainees entering their final year of training are behind their expected training trajectory. Conclusion: COVID-19 continues to have a significant impact on surgical training in the UK. Urgent, co-ordinated action is required by key stakeholders to mitigate for these effects and maintain future surgical

## SP10.2.6 The Quantitative Impact of COVID-19 on surgical training in the United Kingdom

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Aims: COVID-19 has had a global impact on all aspects of healthcare including surgical teaching and training. This study aimed to quantify the impact of COVID-19 on operative case numbers recorded by surgeons in training, and annual review of competency progression (ARCP) outcomes in the United Kingdom.

Methods: Anonymised operative logbook numbers were collated from e-logbook and ARCP outcome data were collated from the Intercollegiate Surgical Curriculum Programme (ISCP) database for trainees across core and the ten higher surgical specialities. Operative