

# SAS

JUNE 2010  
newsletter

The College has long been committed to supporting SAS surgeons in all aspects of their careers. Our SAS committee has been working to help achieve this and we hope that this newsletter will provide you with some more information about the College's work with, and for, SAS surgeons.

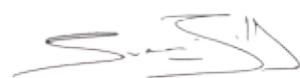
The College established its SAS committee five years ago. It provides a formal mechanism through which SAS surgeons' views are represented within and outside the College. The committee also aims to communicate the views of SAS surgeons to the College and its Council, to promote SAS involvement in all relevant areas of College activity, and to support SAS surgeons in the workplace. The committee comprises eight SAS surgeon members, who are appointed through an open recruitment process, and one member who is a Trustee and an elected member of the Council. The committee's SAS co-chair is also invited to attend Council meetings.

The College is also a member of the Joint College SAS Committee. This group brings together SAS representatives from many medical royal colleges in order to better understand topics affecting SAS doctors in the different specialties and to share information and good practice. Earlier this year, the joint committee hosted its first conference, which was held at The Royal College of Surgeons of England. The conference attracted excellent speakers and over 200 delegates. You can read a full review of this conference later in this newsletter.

John Black, President of the Royal College of Surgeons, has recently reiterated his view that SAS surgeons provide an invaluable service within

the NHS and form a vital part of the surgical team.<sup>1</sup> As revalidation approaches, the College is clear that SAS surgeons should revalidate to the same standards and with the same tools as their consultant colleagues: all those carrying out surgery must be revalidated in the same way.<sup>2</sup> As a College, we are continuing to work to facilitate a revalidation system that is both robust and suitable for all. For example, the RCS portfolio is available and suitable for all surgeons who are members of the College and will assist them with the revalidation process.

In this newsletter you will read about a range of ways in which we aim to engage with and support SAS surgeons. We hope that you find this both interesting and informative. If you have any questions or comments please don't hesitate to contact us at [sas@rcseng.ac.uk](mailto:sas@rcseng.ac.uk) or visit our website: [www.rcseng.ac.uk/career](http://www.rcseng.ac.uk/career), where you will find a section about SAS surgeons.

Miss Su-Anna Boddy  
Co-Chair SAS Committee  
RCS Council Member




Mr Victor Babu  
Co-Chair SAS Committee  
RCS Invited Council Member

1. Black, J. Something old, something new. *Ann R Coll Surg Engl (Suppl)* 2010; **92**: 6–7.

2. The Royal College of Surgeons of England. *An Overview of Revalidation for Surgeons*. London: RCSE, 2010.

“the effervescent Dr Sam Hutt [...] was welcomed with gusto by all those in the audience”



## JOINT COLLEGE SAS CONFERENCE 29 JANUARY 2010

Maya Harris

The Royal College of Surgeons of England hosted the first conference organised by the Joint College SAS committee. The joint committee brings together SAS representatives from many of the medical royal colleges. This conference aimed to shed light on many of the issues affecting SAS doctors and to highlight common ground between the specialities.

The conference programme provided an excellent balance of factual information and a number of inspirational SAS ‘doctors with talent’. These included Gabriel Weston, an ENT surgeon and author of *Direct Red – A Surgeon’s Story*. In her presentation, as in her book, Gabriel explored boundaries between medical practice and humanity and surgical uncertainty. She also discussed how she manages the fine balancing act of being a surgeon, a mother and an author.

Later in the day, Dr Radhakrishna Shanbhag spoke of his service as a local magistrate, describing how the experience has enriched him as a human being and how contributing to his wider community has given him great satisfaction.

The last of the day’s ‘doctors with talent’ was the effervescent Dr Sam Hutt, who has managed to combine a career as a country and western singer (performing as Hank Wangford) with work in sexual medicine and contraception. His lively, interesting and funny presentation was welcomed with gusto by all those in the audience.

In addition to these inspirational talks, delegates received presentations regarding a variety of pertinent topics. Heather Lawrence, Chief Executive of Chelsea and Westminster Hospital, and Sir



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“Gabriel explored boundaries between medical practice and humanity and surgical uncertainty”



Christopher Edwards, Chair of Medical Education England, both commented on how SAS surgeons represent a very valuable resource in NHS: in the current climate of financial restraint, these grades have great potential to expand NHS services and should be deployed with support from managers.

Later in the day, Jenny Cowpe of Keele University delivered a great talk on the importance of clinical management and leadership for SAS doctors and talked about the courses aimed for the grade at Keele University.

Other speakers included Dr Amer Jafar on SAS grades and research projects, Dr Elizabeth Spencer on access to top-up training and engagement with local training structures and Dr Richard Kerr on the use of Department of Health SAS CPD funds.

These presentations were followed by a heated debate between Dr Ashok Pathak and Mr Ram Moorthy on modular credentialing. The audience’s opinion was divided as to the many advantages and disadvantages of the introduction of modular credentialing for the SAS grade, which was reflected in the pre and post-debate vote.

Professor James Drife rounded up the day by giving a very insightful talk on combining career and family and the importance of work-life balance. The day was a great opportunity to mix and network and to combine business and pleasure.

Presentations from the conference are available from [www.rcseng.ac.uk/career](http://www.rcseng.ac.uk/career)

# SAS CAREER PATHWAYS

**Makani Hemadri**

Associate Specialist in General Surgery  
Clinical Innovation and Improvement Lead



I love to go to work because I enjoy my unique role of being a surgeon and at the same time looking at the wider system. Being an SAS surgeon is quite challenging due to the impact of narrow sub-specialisation, increasing consultant numbers and shorter, streamlined training. I set out on a journey to improve the system and reinvent myself and have been on that course for nearly a decade.

On that journey, I have been the Chair of the Hospital at Night project, created to establish a single-visit general surgery service for all day surgery, that reduced haemorrhoidectomy to a two-hour stay procedure done under local anaesthetic and put my department and our trust ahead of the curve on venous thromboembolism prophylaxis months before it became mandatory. We also put patients in front of surgeons to provide direct subjective feedback in anticipation of stronger patient-public involvement in the future.

Some of these activities won my team the local Health and Social Care Award for Service Transformation in 2008. The Leaders for Change Award from the Health Foundation followed by spending a year as Fellow of the NHS Institute for Innovation and Improvement in 2008-09 broaden my outlook further.

Intensive training in healthcare improvement that included the Advanced Training Program at Intermountain, Salt Lake City, USA, and the Top

Management Programme of the Kings Fund, has convinced me that the future of healthcare will be far better and I wish to play my small part in getting there.

I now spend a large chunk of my time on clinical patient safety, system-wide healthcare quality and clinical engagement. I am a member of the Improvement Faculty of the NHS Institute, member of the SAS committee of the College (and hence an ex-officio member of the Patients Liaison Group of the College) and Honorary Clinical Tutor at Hull York Medical School, amongst a few others. I have also recently agreed to be a human factors advocate/buddy for the Clinical Human Factors Group.

I believe that hard work and persistence is rewarding. I feel that there will always be obstacles to what we want to achieve if we see them as such; so-called insurmountable obstacles and failures are merely pointers for us to reprioritise and aim for something higher.

For more profiles of SAS and other surgeons, visit [www.rcseng.ac.uk/career](http://www.rcseng.ac.uk/career)



# RCS

ADVANCING SURGICAL STANDARDS

Education Department

The Royal College of Surgeons of England

## FRCS (Tr&Orth) Viva Revision Course for SAS Orthopaedic Surgeons

### 6–7 August 2010

The aim of this course, for staff and associate specialist surgeons, is to enable orthopaedic surgeons who may have spent considerable time in a relatively specialised area to explore the broad range of orthopaedics required for the FRCS (Tr&Orth) examination in a friendly atmosphere, with particular attention being paid to viva (oral examination) technique.

At the end of the course participants should have a clear understanding of the areas of their knowledge and understand techniques that require further development. Participants will develop their ability to demonstrate their knowledge and understanding in an oral examination setting.

This course is also available for Orthopaedic Trainees on 30-31 July 2010

Fee: £210

Contact the Education Department for details on our courses.

020 7869 6300

[education@rcseng.ac.uk](mailto:education@rcseng.ac.uk)

[www.rcseng.ac.uk/education](http://www.rcseng.ac.uk/education)

# SUPPORTING SURGEONS IN THE WORKPLACE: UPDATE

The College has a major role to play in supporting surgeons in England, Wales and Northern Ireland to implement and maintain high standards of patient care, provide guidance about revalidation requirements and processes and facilitate ongoing professional development. It works in partnership with the specialty associations to provide local, 'on the ground' support for all surgeons through its regional professional affairs infrastructure. This is mapped to strategic health authority (SHA) boundaries and to the devolved nations of Wales and Northern Ireland. It consists of a professional affairs board led by a director for professional affairs (DPA) and nine regional specialty professional advisors (RSPAs). It is separate to the local training and education structure, which is the responsibility of the deaneries and schools of surgery.

The DPA is an overarching role recruited and appointed by the College. This person is the local College spokesperson for professional affairs, engaging directly with the SHA and commissioners and also with the local school(s) of surgery at a strategic level. The RSPA is a revised regional specialty role appointed by the specialty association and ratified by the College. RSPAs provide specialty-specific support to individual surgeons on CPD and job planning. They approve job plans for trusts on behalf of the College and provide specialty input into reorganisation of local services through the DPA and local professional affairs board.

DPAs and professional affairs boards are in place in the following SHAs or devolved nations:

East Midlands	Professor Brian Rowlands
East of England	Mr Surjait Singh
London North West	Mr Jonathan Ramsay
London South	Mr Bill Allum
North West	Mr Mike Zeiderman Mr David Jones
South Central	Miss Anne Stebbing
South East Coast	Mr Andrew Cobb
South West	Professor Paul Abrams
Wales	Mr Colin Ferguson
West Midlands	Mr Stan Silverman
Yorkshire and the Humber	Mr John Ausobsky

Mr Mike Stearns has been recently appointed to London North East and it is envisaged that the North East SHA region and Northern Ireland will come online by the end of 2010. The former College regional advisor and regional specialty advisor roles are being phased out as DPAs and RSPAs are introduced.

Flexibility is key to effective implementation and there are variations in the model to best suit

**Left:** The faculty from an RSPA-organised conference held at the College



**Right:** DPAs attending their induction at the College, September 2009



local requirements. For example, three DPAs/boards are needed in London to ensure adequate representation for the large number of surgeons working in this region. The geography of the North West and South West regions means that more than one DPA/ RSPA for the larger specialties has been appointed.

Since the first DPA appointments in 2008, SHAs have been quick to recognise the significant benefits of having a local professional affairs board. DPAs provide professional leadership and facilitate access to specialist clinical expertise from RSPAs and the local surgical constituency to enhance provision of safe, quality, cost-effective clinical care. SHAs and trust medical directors have welcomed College input into discussions around how revalidation might work locally and they generally support the significant local role that the College and specialty associations expect to play in signposting advice and support to surgeons and to trusts. Surgeons in the workplace have a designated regional representative to support them if problems arise and have access to appropriate careers advice and to College services such as the Confidential Advice and Support Service and the Invited Review Mechanism.

The boards are supported locally through the College's regional council member and regional coordinator network. They are currently involved in a variety of initiatives including:

- Developing guidelines for specialty commissioners based on College and specialty association standards and recommendations.
- Evidence-based collaborative commissioning of local vascular and trauma services.

- Supporting College Presidential visits and providing opportunities for key figures in the local NHS to meet with the President and members of Council.
- Consultation with local surgeons and feedback on professional issues, eg EWTR
- Collection of accurate data to inform local workforce planning.
- Initiatives around clinical leadership and professional development of the local surgical workforce.
- Disseminating information about revalidation requirements and processes and College advice and support services to local surgeons.
- Supporting an appropriate PA/SPA split in job plans.

The professional affairs board provides a single voice for surgery locally. The boards feed back to the College and specialty associations at quarterly meetings of the DPA forum, which is hosted at the College. The forum is the formal mechanism for sharing best practice and developing central policy from the regions. This can then be fed back into local NHS processes. Ultimately, a national picture is built up from the regional landscape and appropriate recommendations on professional matters can be made to the Department of Health.

For further information go to

[www.rcseng.ac.uk/regional/professional-affairs-network-1](http://www.rcseng.ac.uk/regional/professional-affairs-network-1) or contact [lhermans@rcseng.ac.uk](mailto:lhermans@rcseng.ac.uk)

# COLLEGE WEB RESOURCES FOR SAS SURGEONS

The College careers site features a section designed specifically for SAS surgeons. This includes information about entry to the grades, career development and events planned for SAS surgeons.

Visit our website at [www.rcseng.ac.uk/career](http://www.rcseng.ac.uk/career)

You can also follow us on Twitter or join us on Facebook: our two Facebook pages can be found by searching for “Surgical Careers at the Royal College of Surgeons” or “Women in Surgery”. Links to these sites area also available from the careers site.

# REGISTER WITH THE COLLEGE!

The College is committed to providing strong leadership and support for all surgeons in all matters relating to their surgical practice, throughout their surgical careers. In order to better facilitate this, we would like to keep in touch with you, even if you are not a fellow or member.

If you would like to receive occasional mailings from us on topics relevant to SAS surgeons, please email [sas@rcseng.ac.uk](mailto:sas@rcseng.ac.uk) including:

- your full name
- your email address (and any other contact details you wish to provide)
- your GMC number
- your current grade, position and hospital
- your specialty and sub-specialty



## Opportunities in Surgery

The Royal College of Surgeons of England  
35-43 Lincoln's Inn Fields | London | WC2A 3PE  
t: 020 7869 6212 | e: [sas@rcseng.ac.uk](mailto:sas@rcseng.ac.uk)  
[www.rcseng.ac.uk/career](http://www.rcseng.ac.uk/career)

# BECOME A COLLEGE EXAMINER



Acting as an examiner for the MRCS Diploma is both an interesting and rewarding activity. As an SAS surgeon, you can apply to be a basic science examiner. If you are successful in your application, you could be asked to participate in the OSCE, oral, clinical and communication skills sections of the MRCS examination and assist in the development of the examination question banks.

If you are interested in applying to be a basic science examiner, visit <http://www.rcseng.ac.uk/exams/vacancies.html> to download the full eligibility criteria, person specification and application form, or contact:

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and Assessment  
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