SURG and BAUS: United Strength is Stronger

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Tuesday 26 June 2018, SURG Session, BAUS Annual Conference, Liverpool
After a busy day of posters, keynote speakers, e-poster sessions and a resounding victory for the SURG team over the consultants in Urology University Challenge, came the SURG meeting. An evening session covered training updates and challenges, Innovation from Professor Tony Young, the Silver Cystoscope award to Mr Oliver Wiseman and an insight into the admirable anti-bullying programme led by Alice Hartley. This year’s meeting was unique with the first item on the agenda “The future of SURG,” with a single but important question posed to the trainees in attendance:

Should SURG merge with BAUS with dissolution of the SURG charity, yes or no?

With much anticipation, Jonathan Noël, SURG Chairman, introduced the motion and fielded questions from trainees. While there had been canvassing of trainee opinion, a consultation period and discussion regionally and nationally, questions still remained. Would trainees lose their voice? What would happen to SURG funds? Could trainees be out-voted by consultants on trainee matters? Would this make a difference for trainees? What about trainees who are not BAUS members?

Each question was met with murmurs of understandable concern and general discussion. The Chairman and the supporting committee members present responded, with support from Patricia Hagan from BAUS. There was enough discussion and debate that the subsequent vote was far from a formality, with an associated tension.

The trainees present, a sufficient number to represent the trainee body according to the SURG legislation, had the question put to them. An emphatic answer was given with 96% of the trainee vote to SURG funds. The vote summarised the preceding year of discussion and consultation leading up to it. It was a matter taken very seriously by the SURG Committee and the Regional Representatives.

Joining BAUS as a trainee section means the dissolution of SURG, a registered charity. There is huge respect for everything that this trainee organisation achieved in the past. It brought trainees together to share their experiences. Through courses, conferences and fellowships many became better urologists. Its fundraising and charity achievements gave opportunities for prizes and grants. It was a big responsibility to discuss changing something that had achieved so much.

The trainee questions immediately before the vote summarised the preceding year of committee and representative discussions, with and without BAUS.

Would trainees lose their voice?
A separate trainee body can have the advantage of having an independent voice. Views would not have to be representative of a wider organisation. However there is more strength in being part of an on-going dialogue about urology training. Trainees, and their representatives, need to nurture the relationship with their trainers and BAUS. A greater sense of professionalism, close collaboration on shared goals and regular meetings will mean that trainees are more involved in their training. If the trainee body has an issue it would like addressing then this can be raised directly with BAUS with their support and influence potentially invaluable.

What would happen to SURG funds?
The funds that the SURG charity has raised will be protected for trainee courses, fellowships and prizes with new application processes and opportunities due to be announced in the coming year.
Could trainees be out-voted by consultants on trainee matters?

As with other BAUS sections, trainee members will be able to vote on specific trainee matters. Trainees will also continue to have voting rights on matters affecting the whole organisation.

Would this make a difference for trainees?

The merger of SURG with BAUS means that trainees are represented at local and national training meetings. With this brings the opportunity to work closely together with consultants to make improvements to urological training. BAUS has a great collective clinical, educational and managerial experience and trainees will be benefit from this. The infrastructure in place will allow more efficient communication and legislature, giving more time to focus on important training issues.

The change of name and the new relationship with BAUS is not the end. This needs to be the start of greater trainee engagement with their representatives to communicate their experiences so they can be shared and/or improved. Representatives and the trainee committee will look to make a number of improvements and provide new opportunities to enhance the training experience.

While the last year focused on the complexities of dissolving SURG and forming the trainee section of BAUS, there has been a drive to improve training. The committee initiated discussions to implement a more formalised structure to paediatric urology experience, are in negotiations for free on-call accommodation for non-resident registrars nationally and a much improved trainee section of the BAUS website is nearing completion. At the recent BAUS conference, registrars ran a course for trainees unsuccessful at ST3 National Selection for the first time with great success.

The potential to achieve through engagement is demonstrated by BURST (British Urology Researchers in Surgical Training) who made a national and international impact with their collaborative studies MIMIC and IDENTIFY. British urology trainees can build on this work to enhance our reputation both home and abroad.

What about trainees who are not BAUS members?

The section will represent all trainees. A trainee who is not a member can contact their regional representative to raise issues. However a non-member would not be able to access resources on the BAUS website or get the benefits available to members, such as discounted course or conference fees. BAUS is giving ST3 registrars a year’s free membership and is working to reduce costs for more junior trainees.

BAUS and the trainee section are keen to support core trainees, foundation trainees and medical students in pursuing a career in urology. The active core trainee agenda at the BAUS national meeting demonstrates this. Special memberships are available for these groups.

The BAUS Section of Trainees

The vote is done. The process of dissolving the SURG registered charity has begun and the BAUS Section of Trainees is now planning for the future.

Training has been at the heart of BAUS ever since the first BAUS annual general meeting on 29th June 1945 at which the President Ronald Ogier Ward raised 2 main questions. How many urologists did the country need, and most importantly, how should they be trained?

These questions remain today. Welcoming SURG as the BAUS Section of Trainees means that trainees can contribute and shape the future of their speciality and emphasises the importance of trainees and training within the BAUS agenda.

Present challenges that trainees face includes getting adequate experience in paediatrics, female and functional urology, andrology and pelvic oncology in a modernised, centralised NHS. The delivery of patient care has modernised to give the best patient outcomes but how does training keep up with this evolution? Trainees need to share their experiences, engage with their regional representatives and have their opinions discussed at the meetings that matter. This way there can be positive changes to support trainees and trainers in producing the most skilled urologists at the point of CCT.

Trainees have precious time to get the clinical, surgical, management and academic experience they need, and would like, to become urology consultants. What can be done to make training more efficient and effective? The cost of training is considerable. How can courses, conferences and professional memberships be delivered in a more affordable way? The latest GMC survey reported 25% trainees and 20% trainers feel burnout (2). What can be done to address this? How can less than full time training and out of programme opportunities be better supported? These are some of the issues that trainees can discuss, raise and challenge to improve their training experience.

Trainees recognise the huge contribution made by their consultants. Supervision, mentorship, educational roles and work-based assessments take time and commitment. What can be done to support and reward trainers in delivering excellent training?

The last year of discussions have demonstrated that there are so many people and organisations supporting urology trainees locally and nationally. BAUS and its’ subsections all have trainee representatives while industry continue to sponsor courses and conferences. The Urology Foundation promotes research and training in urology and gives support to trainees. Trainees, as individuals and/or a collective, can contribute as much as they wish. They can do this by engaging with their regional trainee representative or volunteering for trainee representative and committee positions, with several elections due later in the year.

United Strength is Stronger

A year of discussions, deliberation and an emphatic vote has been completed. The achievements and history of SURG will be remembered and respected. Its ethos will inspire the current committee and representatives in supporting the development of the best possible urologists of the future. There are many challenges for trainees, trainers and BAUS to establish sustained excellence in Urological training. Time will tell whether a formal Trainee section of BAUS is the best way to do this. An omen may come from the BAUS coat of arms: Vis unita fortior - “United strength is stronger”.

References


Acknowledgement: With thanks to Mark Speakman his contribution. Thank you to the past and present members, representatives and committees of SURG for everything they have done to support Urological Training.

Urology News: urology training

We want to hear examples of training successes and challenges as a regular feature. Please contact Luke Forster, section editor, if you have had an experience you would like to share that others can learn from.

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