

Planning and doing a fellowship: advice during the COVID-19 era

BY LI JUNE TAY

To paraphrase Shakespeare, to do, or not to do a fellowship, that is the question. That may be your question; whether or not to pursue a fellowship, even more so due to the uncertainty of the COVID-19 pandemic. There are many factors to consider including availability of in-house training, operative exposure to a high number of cases, timeframe, geography and family commitments. In addition, any restrictions for international travel may affect your choices. Here are some of my tips for planning a fellowship and making the most out of the opportunities while on a fellowship.

Planning

Some fellowships are more popular than others and may require planning, even up to three or four years in advance. However, not everyone decides on their subspecialty as a junior trainee. There is never any harm in approaching fellowships that are already 'fully booked' as there may be some last-minute availability. Most of the UK-based fellowships are recruited a year in advance.

If all training competencies are met and a trainee is on track to gain certificate of training (CCT) with an outcome one, at annual review of competencies (ARCP), then speak to the training programme director (TPD). There may be a possibility of doing a fellowship in the final year of training, as an out of programme training (OOPT) experience. Support from the TPD is crucial in organising this. If one chooses this path, this requires deanery approval at least six months ahead of time. Be aware that currently if one obtains CCT whilst on an OOPT, one would forgo their grace period. Conversely, if attainment of CCT is delayed due to the pandemic and a fellowship has already been planned based on the original CCT date, it is worthwhile speaking to the fellowship programme director and the TPD to discuss alternative arrangements.

A fellowship may be costly, especially an overseas fellowship. Look for funding opportunities, for example The Urology Foundation (TUF) awards bursaries for certain fellowships.

Networking

Speak to mentors and other trainers about their experiences. Try to spend time during training in the subspecialty of interest. Attend conferences, social events and engage in social media as some fellowships are informally advertised on Twitter as well as on NHS jobs. Explore the British Association of Urological Surgeons (BAUS) website fellowship directory or the Royal College of Surgeons (RCS) website. Demonstrate an interest and approach

the fellowship director, even if the fellowship advertisement is not out yet. Visit the department, spend a day in theatre and speak to their current fellow in advance. This will demonstrate your interest in that fellowship and there is a wealth of information to gain by speaking to someone who is currently doing it.

Research the fellowship

For example, in a robotic oncology fellowship, enquire about the caseload, number of robots, number of fellows or registrars (that you will be sharing cases with), robotic sessions per week, elements of service provision (on calls, general clinics) and other types of cases that you will be exposed to. The availability and experience of bedside assistants will also play a crucial role in training. In addition, find out how COVID-19 has affected the services and the training of fellows in that department. It is important to be aware of the opportunities that will likely remain, should the unexpected happen again.

Preparing your CV

It is common for popular fellowships to receive as many as 30 applications for one post, and hence it is a competitive process to secure a position. Get as much operative exposure in the subspecialty prior to the fellowship once the core competencies are met. Attend simulation courses and engage in national committees. Try to focus your audit and research projects towards your subspecialty to demonstrate your commitment. However, always maximise opportunities in every rotation as a seemingly unrelated project may become the topic of discussion in the interview. Never underestimate the role of a good reference and be a team player.

Family commitments and less than full time options

One of the greatest challenges is that the ideal fellowship may not be in the ideal location. It may mean moving your family for a year (or leaving your family), a long commute to work, or living away during the week. In addition, most fellowships may not offer a less than full time option, unlike the training programme. Speak to the fellowship programme director. Perhaps there may be two excellent candidates for the fellowship who are wishing to work less than full time. There may be a scope for negotiating a timetable that will work for everyone, including options for remote working especially during the COVID-19 recovery phase.

During the fellowship

Time flies! A year is incredibly short. Make use of every opportunity to learn, not just operative skills, but also clinical decision making and working in a multidisciplinary team. Keep a logbook of operations and indicate which step of the procedure was performed, including the degree of supervision. If possible, record the procedure and watch it again. Obtaining regular feedback from the trainer and discussing progress is very useful. Spending time on the robotic simulator (if applicable) when on call on site is also useful. Keep a hand in emergency and general urology as this will

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be a required skill in most consultant jobs. Engage in research, audit and teaching opportunities during your fellowship.

If COVID-19 affects training, for example elective operating cancelled due to bed pressures, there may be creative solutions to overcome such issues. During my fellowship we successfully changed the pathway for robotic assisted radical prostatectomy (RARPs) patients to go from an inpatient bed to a day surgery bed postoperatively. This allowed for no cancellation of cases, as day surgery was ring-fenced as a green zone and was not dependent on emergency admissions.

If the fellowship is done as an approved OOPT, there is access to all the benefits of a trainee, including study budget. This could contribute towards an aspirational course or international conference. Being on a recognised EAU Robotic Urology Section (ERUS) fellowship, I had the opportunity to attend the ORSI Academy on a heavily subsidised rate and claim study budget towards the cost. In addition, it may be possible to claim some relocation expenses. This also means regular updates with the TPD and engaging with the Intercollegiate Surgical Curriculum Programme (ISCP) and the deanery.

My experience

My fellowship year at Addenbrookes has been incredibly fulfilling. I was treated like a peer and consultant colleague. My opinion counted. It felt like a year of finishing school before consultant practice. There were sacrifices and challenges, but the rewards were countless. I now consider my trainers and colleagues as lifelong friends. I hope to continue to collaborate and seek advice from them during my professional practice. I hope this article will provide some practical advice and give insight to urology trainees considering a fellowship.

Top tips

Planning a fellowship

- Plan early but be flexible! Consider a local fellowship if international fellowships are difficult.
- Early discussion with your training programme director and other consultants in your subspecialty is crucial, especially if wishing to do a fellowship as part of training.
- Structure training placements to have exposure in your subspecialty of interest.
- Actively engage in research and audit. Attend relevant courses if possible and ensure your portfolio is optimised.
- Network!
- Keep an eye on BAUS and RCS websites for information on UK fellowships, and the ERUS website for overseas robotic fellowships.

During a fellowship

- Maximise operating and training opportunities, be flexible, find creative solutions to issues.
- Keep a hand in general and emergency urology.
- If undertaking a fellowship as part of training, ensure ISCP assessments are up to date.
- Supervision of junior colleagues and medical students on projects will maximise output.
- Review progress with trainer regularly.

Useful links

- https://www.baus.org.uk/trainees/baus_uk_fellowship_directory.aspx
- <https://uroweb.org/section/erus/erus-robotic-certified-host-centers/>
- <https://www.rcseng.ac.uk/education-and-exams/accreditation/rcs-senior-clinical-fellowship-scheme/national-surgical-fellowship-scheme-register/urology/>
- <https://www.hee.nhs.uk/sites/default/files/documents/Study%20leave%20guidance%20overview.pdf>
- <https://www.theurologyfoundation.org/professionals/who-and-what-we-fund>

Comments from Ben Lamb, Consultant Urological and Robotic Surgeon, Addenbrooke's, Cambridge; undertook a fellowship in 2017 in Melbourne, Australia

- When planning a fellowship do your research, speak to lots of people and keep your options open.
- Before going into a subspecialty for fellowship ensure the rest of your portfolio is optimised e.g. general and emergency urology.
- Plan ahead of ahead – start thinking and talking to people about consultant jobs.
- During the fellowship develop expertise by immersing yourself in your chosen area: watch videos, use simulation, watch other people operate, operate yourself, attend conferences, go on courses, undertake quality improvement projects, write articles!
- Don't forget family and friends – you will need their support when you start as a consultant.

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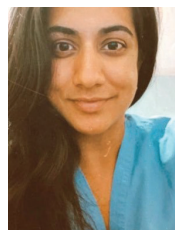
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