"Competencies within General Surgery"

The UEMS Section of Surgery Model

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What is Europe?
What is Europe?

- Geography
- Countries
- Culture
- History
- Religion
- Language
- Politics
- Economics
- Migration
Where people live & work
... and migrate to
European Attitude

Thank you Austrian

Danke schön

Syrian

रच्च सौय
European Union

1957: 6 countries  
2015: 28 countries
European Union

- 28 countries
- > 500 million inhabitants
- largest peacekeeping project in Europe ever
- principle of "freedom of movement, labour and services"
- principle of "subsidiarity"
- principle of "mutual recognition of diploma"
European Union

- **European Union**
  - **Legislation**
    (law = a unique legal system which operates alongside the laws of member states of the E.U.)
  - **Directives**
    (directive = is a legislative act of the E.U. which requires member states to achieve a particular result without dictating the means of achieving that result)

- **Advisory Bodies**
  - **U.E.M.S.**
    (Union of the European Medical Specialists)
1958 - 6 members
- NGO & NPO

2015: 37 member states
- 28 EU countries
- Non-EU: Norway, Switzerland, Iceland
- associate member: Armenia, Israel, Turkey
- observer status: Georgia, Lebanon, Morocco

covers all "Medical Professional Authorities" (1.6 mio M.D.s)
- Medical Chambers
- Scientific Societies
- Professional Boards

website: www.uems.eu
Not all specialties are recognised in all countries and therefore not all countries have training requirements for all specialties.

Even when specialties are recognised in certain countries across Europe there is great variation regarding the way the relevant training requirements are established and the quality of those requirements.

The free movement of healthcare professionals across Europe generates the need for quality assurance regarding the qualifications of medical specialists beyond the recognition by one specific country.

The influx of medical specialists in Europe from countries beyond the broader European area also generates the need for sound benchmarking and quality control of their knowledge, skills and qualifications.

Therefore, the UEMS does not aim to replace established EU or national legislation but to complement and support them where this is needed by offering robust European training guidelines created by medical specialists and aiming to support medical specialists for the benefit of patients.
U.E.M.S. Tasks
Section, Divisions and Boards

- Promote "free movement"
  - make labour markets more flexible & further liberalise the provision of services
  - encourage automatic recognition of qualifications and simplify administrative procedures
- Harmonisation and standardisation of the highest level of specialist training and medical care
  - Postgraduate specialist medical training (Syllabus, LogBook)
  - Standards for specialist qualifications
  - Quality Assurance in specialist medical practice
  - CME-CPD – Continuing Medical Education and Professional Development
  - Clinical Guidelines (not: CEN)
- E.B.S.Q. (European Board of Surgery Qualifications)
  - Assessment for "transferable competencies"
  - Board Qualification (Fellow of the European Board of Surgery - F.E.B.S.)
- Cooperation with Scientific Societies
- Accreditation of training centers/institutions
U.E.M.S. main objectives

- Harmonisation
- Standardisation
- Validation & Accreditation
U.E.M.S. Tasks

- Harmonisation ... of what?
  - denominations?
  - contents?
- Standardisation ... of what?
  - structures (training centers)
  - processes
  - quality
- Validation & Accreditation ... of what?
  - examination
  - accreditation of training centers
  - accreditation of trainers & examiners
The House of Surgery

General Surgery

- Endocrine
- Coloproct.
- Tx
- Heart
- Oncology
- Thoracic
- ECS
- Vascular
- Breast
- Hand
- HBP
- Trauma
- Pediatric
- Plastic
- General?

Common Trunc/Basic Surgery

OMF
Urology
Gyn
Neuro
Orthop.
ENT
The House of Surgery

General Surgery

- Trauma
- Thoracic
- Pediatric
- OMF
- Urology
- Gyn
- Vascular
- Heart
- Plastic
- Neuro
- Orthop.
- ENT

Common Trunc/Basic Surgery
Moussaka Partitioning Procedure
General Surgery: "automatic mutual recognition" in the Directive
- no motivation for E.U. surgeons

all other (sub)specialisations: "general system"
- motivation to show qualification
- development of multiple Divisions within the Section Surgery

harmonisation process would lead to a very low common denominator: useless
- definitively no motivation
about 85% of surgery is GenSurg
- who else does the emergencies?

regional differences
- population density
- geography

different demands
- University Clinic
- District hospitals

different national regulations

jeopardy: harmonisation at the lowest common denominator

settings standards, definitions & qualifications
European Training Requirements

TRAINING REQUIREMENTS
FOR THE SPECIALTY OF
GENERAL SURGERY

EUROPEAN STANDARDS OF
POSTGRADUATE MEDICAL SPECIALIST TRAINING

APPROVED BY THE UEMS MANAGEMENT COUNCIL 2013
European Training Requirements for all "Transferable Competencies"

- Definition & Rationale of the "Transferable Competency (=TC)"
- Criteria for Training Institutions, Centres and Trainers
- Syllabus (catalogue of competencies within TC)
  - Theoretical Knowledge
  - Knowledge & Skills
- Curriculum (=LogBook)
  - Intervention, Procedures, Operations (numbers!)
- Eligibility Criteria for the "TC Board Fellowship"
  - incl. CME, Mini-CEX, DOPS, courses, hospitations, publications
- Board Examination
Qualification: Title "F.E.B.S."
(Fellow of the European Board of Surgery)

2 step process: Eligibility & Examination
"Assessment Quality Requirements"

Eligibility
- open for non-EU candidates
- CCST not mandatory
- structured catalogue of criteria
- international recommendation
- LogBook (with procedures & numbers)
- CME credits
- decision: Eligibility Committee
Board Examination Quality

- Eligibility Committee (Divisions)
- Examination Committee (Divisions)
- Credentials Committee (EBS/EBSQ)
- Preparatory Course Committee (EBS & Divisions)

All report to the European Board of Surgery in the Section of Surgery
Successful candidates are rewarded the title: "Fellow of the European Board of Surgery"

Honorary Diploma for recognised experts
- Eligibility Criteria for HD
- Applications scrutinised by Eligibility Committee
Credentials Committee

- Board certified members (F.E.B.S.)
- follow EBS regulations "Assessment Quality Requirements"
- not involved in the relevant examination
- evaluation of appeals
- decision on appeals
- report to the EBS/EBSQ in the Section of Surgery
UEMS - Section of Surgery
Divisions, Boards & Working Groups

Divisions & Boards
- General Surgery
- Coloproctology
- Endocrine Surgery
- Surgical Oncology
- Thoracic Surgery
- Transplantation
- Trauma Surgery
- Breast Surgery
- HPB Surgery

New Divisions & Working Groups
- Hand Surgery
- Esophagus, Cardia & Stomach Surgery
- Minimal Invasive Surgery
- Metabolic & Bariatric Surgery
- Emergency Surgery
- Endoscopy & GI-Functional Diagnostics
- Basic Sciences (projected)
"transferable competencies"

- **draw back from denominations**
  - omit jungle of different names for the same contents
  - (e.g. GI-surgery and visceral surgery)
  - omit same name for different contents (e.g. emergency)
  - omit harmonisation and low common denominator (=never ending story)

- **switch to competencies**
  - honest logbooks from different institutions
  - enhance rotation
  - individualised combinations of fellowships
"transferable competencies"

- consider national peculiarities of contents
  - e.g. thyroid surgery, breast cancer, endoscopy
- allow variable duration of training
- consider national structural requirements
  - e.g. Finland versus Greece (geography)
- allow individual programs and combinations
- enhance migration based on contents, competencies and qualifications
- full legal acceptance and automatic mutual recognition following the EU-principle of subsidiarity as final goal
The House of Surgery

European Board of Surgery

Endocrine  Coloproct.  Tx  General

Oncology

Breast  Hand  HBP  Emerg

MBS  MIS  Endo  Basic

Common Trunc/Basic Surgery

Trauma  Vascular

Thoracic  Heart

Pediatric  Plastic

OMF  Orthop.
The guidelines aim to provide some overall direction for the development of ETRs and they don't aim to be didactic or restrictive.

The guidelines are based on the challenges faced and the experience gained over the years from the development of ETRs by UEMS Sections and Boards and they address overall principles rather than specific details.

Sections and Boards are encouraged to use the principles of the guidelines and then tailor the development and writing of the ETRs in a way that matches the character of their specialty or "transferable competency".

Adopting the lowest common denominator while establishing ETRs would be automatically very inclusive but will mathematically result in recommending very low standards that cannot guarantee high quality training and, subsequently, high quality care.

On the other hand, setting unrealistically high expectations regarding the standards of training that could only reflect an ideal and most probably utopic approach will also almost certainly make it utterly impossible for any European Country to follow.
European Board of Surgery
Fellowships in "transferable competencies"

- General Surgery
- Coloproctology
- Endocrine Surgery
- Surgical Oncology
- Thoracic Surgery
- Transplantation
- Trauma Surgery
- Breast Surgery
- HPB Surgery
- Hand Surgery
- Esophagus, Cardia & Stomach Surgery (2015)
- Minimal Invasive Surgery (2016)
- Metabolic & Bariatric Surgery (2016)
- Emergency Surgery (2016)
- Endoscopy & GI-Functional Diagnostics (2016)
- Basic Sciences (projected)