Royal College of Surgeons

ADVANCING SURGICAL CARE

International Strategy 2016–2020

Contents

> “Health is included as one of the UN’s new Sustainable Development Goals (SDGs) from 2016, and the RCS is publishing this strategy as its contribution to the global surgical community response to this imperative.”

Introduction

We are committed to advancing surgical care internationally.

This strategy is an important milestone in delivering the aspirations set out in the RCS's strategic priorities for 2015–19. As an organisation with a significant international membership it is right we play our part at the local, national, and international levels to improve surgical care, education and training, to meet the needs of patients worldwide.

The recent Lancet Commission on Global Surgery report estimated that in 2010 a lack of surgical care led to 18.6 million fatalities in that year. They also estimated five billion people around the globe do not have access to safe and affordable surgical care, which shows the sheer scale of the issues we need to tackle. A key element of our strategy is the deploying of skills and expertise of members in projects benefiting low and middle-income countries.

The challenges for surgery internationally are immense but not insurmountable if we work together with our members, overseas health institutions and strategic partners to pull together resource and expertise. Only this way will be able to realise our aspirations and goals.

Clare Marx
President, RCS

RCS fellows and members have been involved with international surgical work in resource-poor settings for well over 100 years.

Many of these links have been through NGOs, faith-based organisations, NHS trusts and surgical specialist societies. In the last couple of years there has been increased interest from both established consultants, trainees and also students to be involved globally at an appropriate level. The publication of the Lancet Commission on Global Surgery, and the founding of the group GASOC (Global Anaesthesia, Surgery and Obstetric Collaboration) are both results of this renewed interest. The RCS wants to encourage this important work, and as outlined in the strategy below is keen to give support in terms of information, advice, research, networking and training. We want to work wherever possible with likeminded institutional partners to build up local capacity.

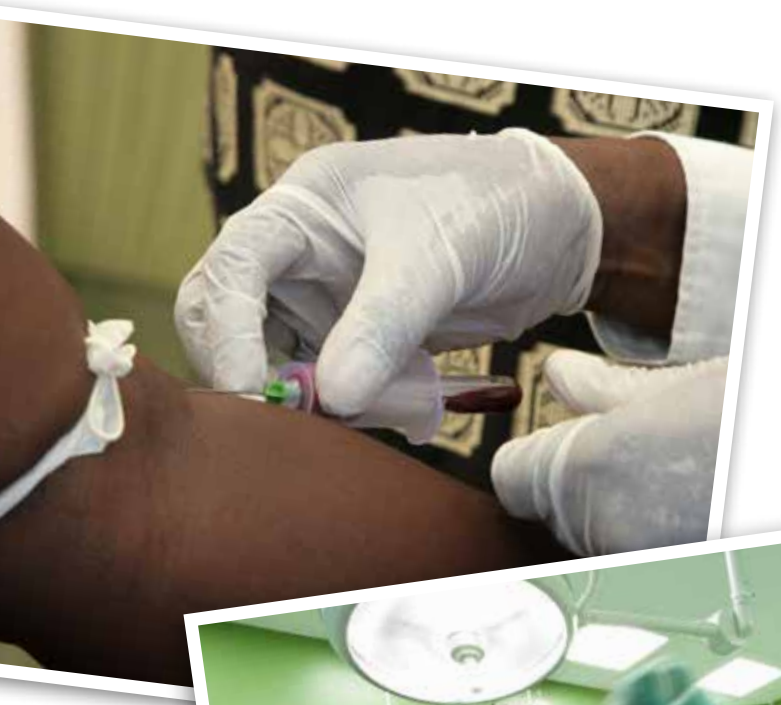
The RCS has three new overarching strategies for surgery in the UK. We have used those three strategies to inspire our international work and we want to work with our partners to fulfil them in the neediest parts of the world.

Vivien Lees
Surgical Lead, International

The Royal College of Surgeons

The RCS has for many years fostered a community of surgeons dedicated to operating at the highest standards of their profession across the world.

- The RCS has more than 20,000 members, of which almost a quarter are based outside the UK in 101 countries across the globe.
- The RCS delivers examinations in 24 countries to over 1,400 candidates each year.
- The RCS has approved training partners in 9 countries delivering selected RCS courses.
- Through its International Surgical Training Programme (ISTP), the RCS has enabled more than 50 surgeons from 11 countries to undertake up to 2 years' training in NHS hospital trusts.
- RCS has a long-standing programme of research fellowships and collaboration that is increasingly international.
- RCS has accredited training centres and courses in China, India and Oman.



The context

The need for improved and increased high-quality surgical care globally has never been greater and has been the focus of considerable international attention recently.

The Lancet Commission on Global Surgery's landmark report, *Global Surgery 2030*, was published in March 2015 and describes the role of surgical and anaesthesia care in improving the health of individuals and the economic productivity of countries. It has five key messages:

1. 5 billion people lack access to safe, affordable surgical and anaesthesia care when needed.
2. 143 million additional surgical procedures are needed each year to save lives and prevent disability.
3. 33 million individuals face catastrophic health expenditure due to payment for surgery and anaesthesia each year.
4. Investment in surgical and anaesthesia services is affordable, saves lives, and promotes economic growth.
5. Surgery is an indivisible, indispensable part of healthcare.

The report makes a powerful economic argument for investing now in improving surgical care globally. It calculates that the economic loss to LMICs of not addressing the issue will be $12.3 trillion in total GDP losses by 2030, reducing annual GDP growth by up to 2%. In contrast, the cost of addressing the scale-up of surgical services by 2030 to the levels called for in the report is estimated at $420 billion.

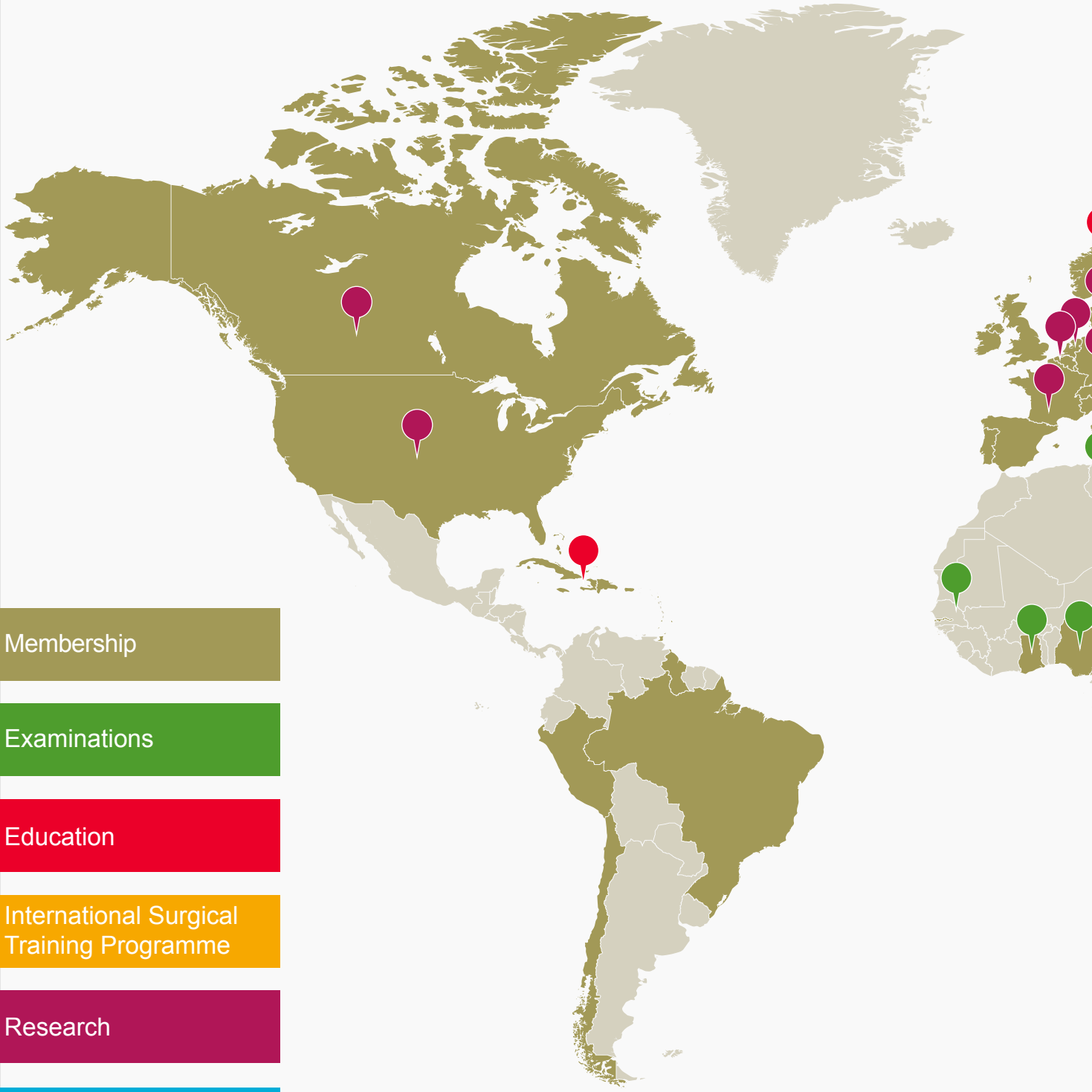
The World Health Assembly (WHA) has declared in a 2015 resolution that surgery is part of primary care and an indispensable part of healthcare.

Finally, health is included as one of the UN's new Sustainable Development Goals (SDGs) from 2016, and the RCS is publishing this strategy as its contribution to the global surgical community's response to this imperative.

This international strategy aims to build on the lead given by the Lancet Commission. We aim to "support surgical capacity building in LMICs by fostering collaborative partnerships with local providers." We agree that the means for this is to develop collaborative partnerships with national governments and local providers. Our primary target is the development of the surgical workforce through advice, education and training.

> "The World Health Assembly (WHA) has declared in a 2015 resolution that surgery is part of primary care and an indispensable part of healthcare."

RCS international activity



Membership

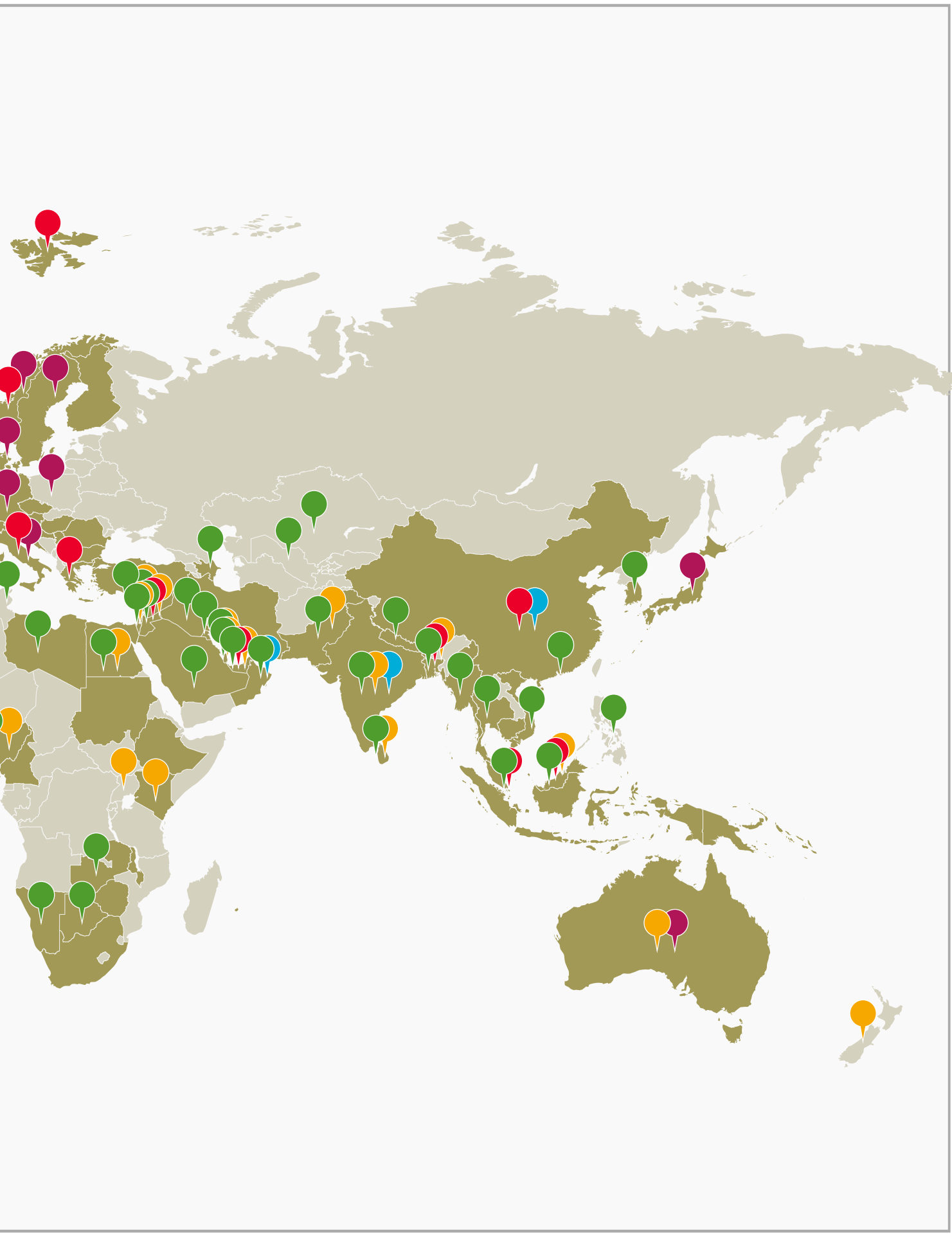
Examinations

Education

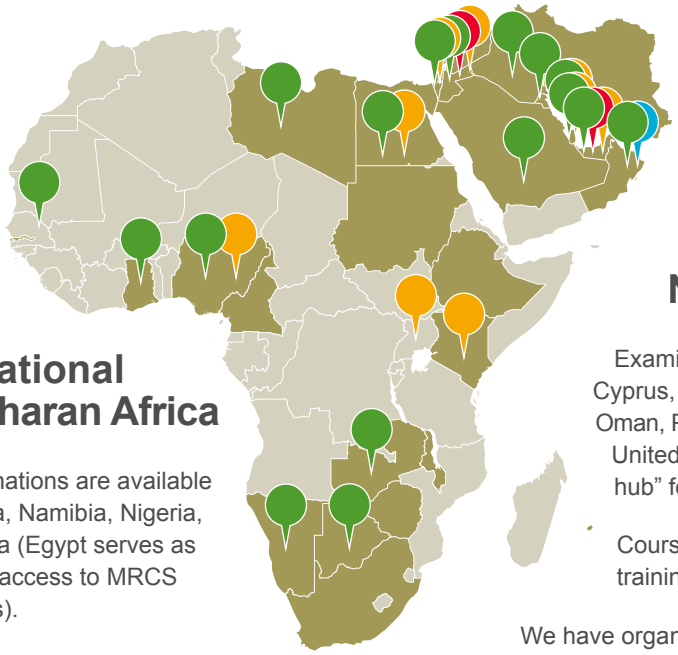
International Surgical Training Programme

Research

Accreditation



Our regional priorities



RCS International and sub-Saharan Africa

Membership examinations are available in Botswana, Ghana, Namibia, Nigeria, Senegal and Zambia (Egypt serves as a “regional hub” for access to MRCS Part B examinations).

We have organised ISTP training placements for seven surgeons from Kenya, Uganda and Zambia.

We will:

- Increase our partnerships and collaboration with healthcare institutions in this region as our priority.
- Strengthen links with national and regional colleges of surgeons in the region. These include the West African College of Surgeons (WACS) and the College of Surgeons of East, Central and Southern Africa (COSECSA).
- Focus our efforts on the DFID target countries in this region – Congo, Ethiopia, Ghana, Kenya, Liberia, Malawi, Mozambique, Nigeria, Rwanda, Sierra Leone, Somalia, South Africa, Sudan, South Sudan, Tanzania, Uganda, Zambia and Zimbabwe.
- Identify sources of external funding to support projects and enhance collaboration in the region.
- In countries where member numbers support, to identify an RCS International Adviser to provide information and advice on his or her country.

RCS International and the Middle East / North Africa (MENA)

Examinations are currently offered in Bahrain, Cyprus, Egypt, Iraq, Jordan, Kuwait, Lebanon, Libya, Oman, Palestine, Qatar, Saudi Arabia, Tunisia, and the United Arab Emirates. Egypt serves as a “regional hub” for access to MRCS Part B examinations.

Courses are delivered through approved training partners in Jordan and Sharjah.

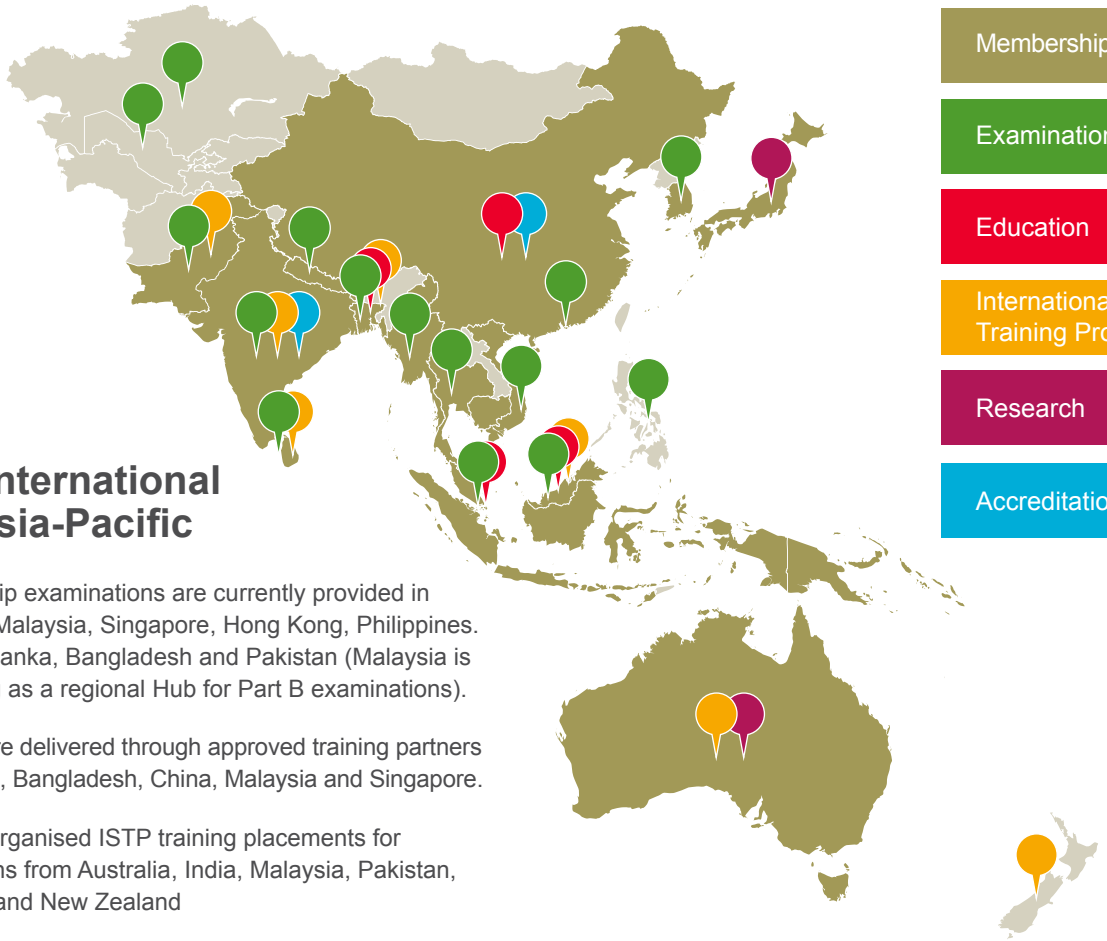
We have organised ISTP training placements for 17 surgeons from Bahrain, Egypt, Jordan, and UAE.

There is an accredited training centre in Oman.

Economies in this region are on a more developed and prosperous economic footing.

We will:

- Strengthen links with local, national and regional colleges of surgeons and analogous bodies.
- Identify training and development needs more appropriate to these emerging economies.
- Finance the majority of our projects on a reasonable commercial basis.
- Participate in the UK’s trade-led initiatives through Healthcare UK and UKTI in order to maximise our opportunities.
- Pay due attention to the DFID target countries in the region – Palestine and Yemen.
- In countries where member numbers support, identify an RCS International Adviser to provide information and advice on his or her country.



Membership

Examinations

Education

International Surgical Training Programme

Research

Accreditation

RCS International and Asia-Pacific

Membership examinations are currently provided in Australia, Malaysia, Singapore, Hong Kong, Philippines. India, Sri Lanka, Bangladesh and Pakistan (Malaysia is developing as a regional Hub for Part B examinations).

Courses are delivered through approved training partners in Australia, Bangladesh, China, Malaysia and Singapore.

We have organised ISTP training placements for 32 surgeons from Australia, India, Malaysia, Pakistan, Sri Lanka and New Zealand

There are accredited training centres in China (in Beijing, Chengdu, Nanjing, Shanghai, Guangzhou and Zhejiang) and in India (Pune).

We will:

- Focus our project work on the low and middle income countries of the region, particularly DFID countries Afghanistan, Bangladesh, Burma, India, Nepal and Pakistan.
- Invest in our key regional relationship with partners in Malaysia.
- Establish closer links with healthcare institutions and surgical organisations to identify themes and areas of local importance for development.
- Strengthen links with local, national and regional colleges of surgeons and analogous bodies.
- In countries where member numbers support, identify an RCS International Adviser to provide information and advice on his or her country.

Our strategy

The RCS is keen to extend its membership and other services to benefit surgical care globally. This strategy is a refreshed statement of intent for the college to engage with global surgery and to progress its over-arching mission to advance surgical care. It is organised as a series of strategic priorities.

Priority 1: Projects to develop surgical capacity and capability in developing (LMIC) and emerging economies

The RCS will develop its networks of contacts with national and regional Colleges of Surgery and other healthcare institutions and partners, through which we can increase our knowledge of needs and demand in-country. Through these partners and with this data, we will develop technical assistance projects that are needs-driven, led by local requirements and designed with their own longer-term sustainability to the fore.

We will develop our work through a number of new projects and programmes:

- A programme of **Travel Grants** aimed at stimulating institutional collaboration in surgery between healthcare institutions in the UK and in DFID countries. International travel grants for members and fellows from the UK, and visiting fellow travel grants for surgeons to the UK.
- A programme of "pump-priming" or **project scoping visits** to identify future collaborative projects which will then create project proposals for substantive funding from sponsors and agencies.
- Exploration of **advisory services** based upon our existing capabilities in standards, guidelines and reviews.
- Active development of **approved training partners** in key country markets, through which to offer a core suite of RCS courses.

We will continue our successful conference series **Global Surgical Frontiers**, increasing the participation from, and its relevance to, LMICs. We will also explore opportunities to hold the conference overseas with an LMIC partner.

We will continue the steady and quality-controlled growth of our **International Surgical Training Programme**, (part of the UK's Medical Training Initiative) facilitating international medical graduates to spend up to two years in UK training posts.

We will seek funding from trusts, grant-making bodies and sponsors, or respond to invitations to bid, to secure the finances necessary to deliver these projects. In the emerging economies, we will actively pursue contracts and opportunities that can be delivered on a fee-paid basis. Projects may combine advice, education and training and information but are all expected to have a knowledge transfer orientation.

> "The RCS will develop its networks of contacts with national and regional colleges of surgery and other institutions and partners, through which we can increase our knowledge of needs and demand in-country."

Priority 2: Data and evidence base for reducing variability in patient outcomes

The work of RCS International needs to be based upon the assessment of surgical needs and opportunities. This will be a driving principle in the identification and implementation of projects under Priority 1. The Lancet Commission has given a high-level projection of the shortfall in surgical capacity globally and has identified several areas of research need. One of these is the lack of surgical prevalence, severity and outcome data, another is the lack of cost effectiveness data.

We will secure funding to appoint two research fellows located within academic or institutional partners devoted to research that supports the overall argument of the Lancet Commission.

Priority 3: Information to support the global surgery community

We will source, collate and publish key information of use and of interest to the global surgery community in UK and worldwide.

This will comprise technical information both from our research fellows and from public sources on surgical data and indicators. It will also serve as an information hub for the community, including mapping of activity by surgeons internationally, links to relevant institutions, abstracts and short articles, information about projects and volunteering opportunities.

> We have more than 4,000 members overseas in more than 100 countries and we want to build our relationship with these and UK-based members to pursue the global surgery agenda.

Priority 4: Member engagement and advocacy

We have more than 4,000 members overseas in more than 100 countries and we want to build our relationship with these and UK-based members to pursue the global surgery agenda. We see members overseas as a valuable source of expert local information through whom we can identify needs and potential partners for project opportunities.

We see our members everywhere as guardians of the highest standards of the profession. We see them also as our expert resource and we will seek to deploy that resource as advisors, trainers and knowledge transfer partners.

Finally, we see these members as constituting voices for the college in the global surgery debate and through them we will aim to promote advocacy for universal access to safe surgery and anaesthesia.

Priority 5: RCS international

The RCS will embrace international strategy as one of the key strategic priorities, and we will strengthen our international affairs team which is charged with advancing and delivering this strategy. We will collaborate across directorates in the RCS, including Education, Professional and Clinical Services, Examinations, Membership and Library and Information Services in order that the full weight of the College's resources, experience and expertise can be deployed internationally. Finally, we will engage with our Development Directorate to improve information-gathering, monitoring and successful bidding for grants and contracts that will enable the work described above.

Principles and values

We will guide all our work within the international strategy along the following principles:

Partnership based

We will always seek to work in partnerships with local healthcare institutions and regional and national governments, both to validate the acceptability of our projects to local surgeons and to ensure we develop local capability.

Needs assessed

We will actively work with local partners and seek their analysis of surgical need and priorities and use these as the basis for project design. This will be both an analytical process at the outset of a project and an iterative process keeping projects on track and ensuring they always meet local needs.

Collaborative

We will seek opportunities to collaborate with other medical organisations and particularly those involved with surgery, anaesthesiology and obstetrics. This will include our sister colleges in the British Isles: RCA, RCOG, RCPS (Glasgow), RCS (Edinburgh) and RCSI (Ireland).

Sustainable

We will design and implement our projects so that the improvements in surgical capability will be sustainable after the project has reached its conclusion.

Patient-centred

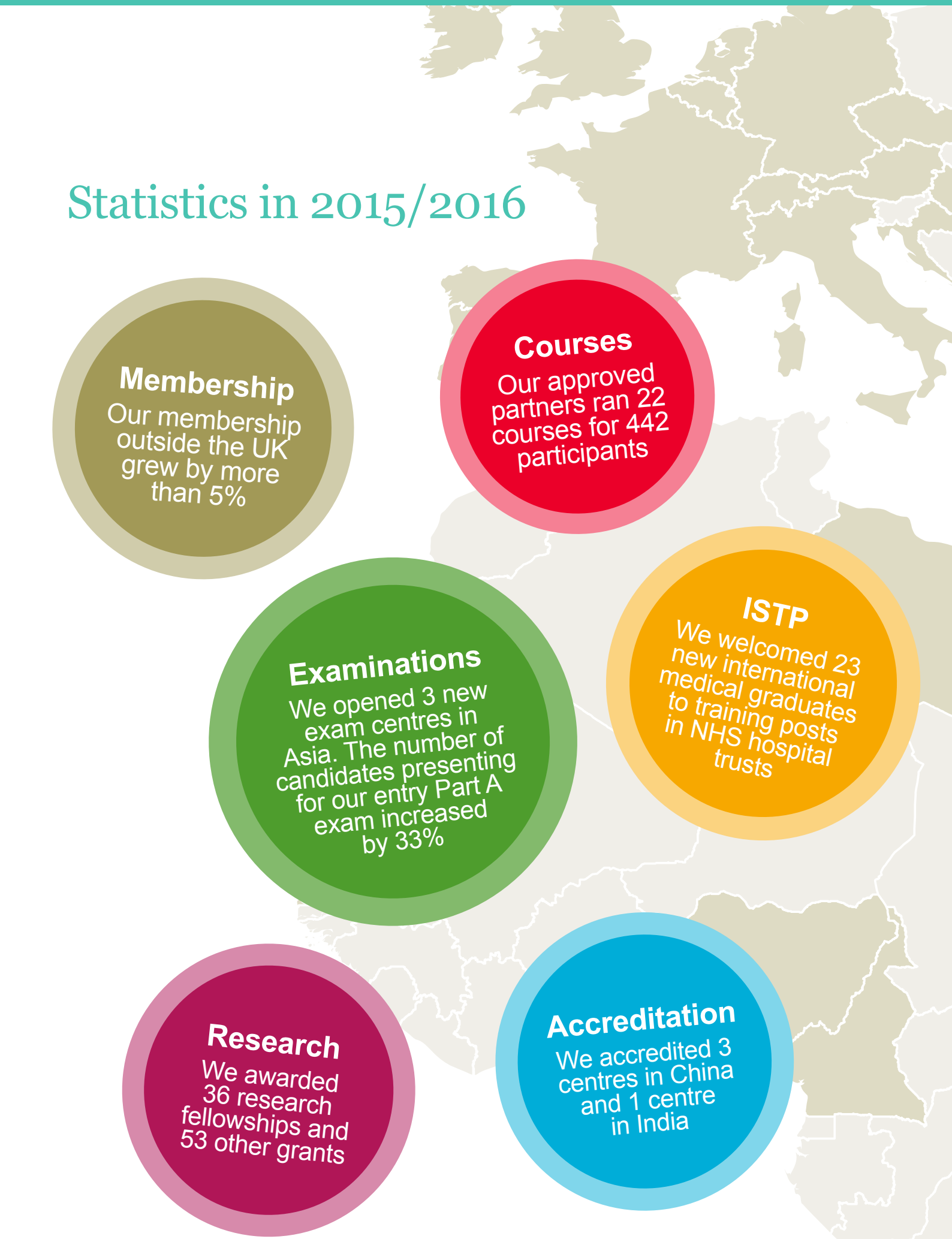
Our aim is to improve the quality, consistency and safety of patient care – to achieve better surgical outcomes through improved surgical standards and clearer communications between patients and surgeons.

Ethical

We will work in ways that are beneficial to the local environment and resources, doing no harm and ensuring we do not inadvertently contribute to a 'brain drain' or a loss of personnel when increasing and enhancing surgical capability.

"We will actively work with local partners and seek their analysis of surgical need and priorities and use these as the basis for project design."

Statistics in 2015/2016



Membership

Our membership outside the UK grew by more than 5%

Courses

Our approved partners ran 22 courses for 442 participants

Examinations

We opened 3 new exam centres in Asia. The number of candidates presenting for our entry Part A exam increased by 33%

ISTP

We welcomed 23 new international medical graduates to training posts in NHS hospital trusts

Research

We awarded 36 research fellowships and 53 other grants

Accreditation

We accredited 3 centres in China and 1 centre in India

“We see our members everywhere as guardians of the highest standards of the profession. We see them also as our expert resource and we will seek to deploy that resource as advisors, trainers and knowledge transfer partners.”

RCS International

International Affairs is the first point of contact at the College for international work and for delivering our international strategy.

Duncan – Sandra – Erinn

International Affairs,
Royal College of Surgeons,
35–43 Lincoln’s Inn Fields,
London WC2A 3PE

+44 20 7869 6053

internationalteam@rcseng.ac.uk

www.rcseng.ac.uk

www.rcseng.ac.uk

Royal College of Surgeons
ADVANCING SURGICAL CARE

The Royal College of Surgeons of England
35–43 Lincoln's Inn Fields
London WC2A 3PE
T: +44 20 7869 6053
E: internationalteam@rcseng.ac.uk

International Affairs