SPECIAL REPORT

Union Européene des Médecins Spécialistes (UEMS) Section of Surgery Division of Vascular Surgery

European Board of Vascular Surgery Annual Report 1995

P. L. Harris

Royal Liverpool University Hospital, Liverpool, U.K.

The UEMS is the official representative body for medical specialists within the medico-political structure of the European Union (EU) and the Division of Vascular Surgery is that part of it which represents vascular surgeons. Vascular surgical societies, or an equivalent national representative group, of all EU member countries (plus Norway and Switzerland) support the Division of Vascular Surgery by sending representatives to attend meetings two or three times a year and by making a contribution to the running costs. Meetings are also attended by representatives of vascular surgical trainees, other prospective EU member states, the Council of Vascular Surgeons in the EU and the two pan-European scientific vascular surgical societies — the European Society for Vascular Surgery and the European Chapter of the International Society for Cardiovascular Surgery both of which additionally make a financial contribution.

1995 was a landmark year for European vascular surgery with the establishment of the European Board of Vascular Surgery (EBVS), and it is probable that the first assessments for European Board certification in vascular surgery will follow within the next 12 months. In taking these steps vascular surgeons have given a lead to other surgical specialty groups, some of which are planning to follow suit as part of a general restructuring of the European Board of Surgery (EBS), designed to meet today's requirements for surgical training more effectively. The main purpose of this report is to bring vascular surgeons up to date with these very important developments.

Reciprocal Recognition of Specialist Training and the Need for Standards

There has been much made of the declared objective of the UEMS to "harmonise" medical training in member countries of the EU. Although the word "harmonisation" is quite appropriate in this context, it has promoted in the minds of some people the notion of "sameness" which is unfortunate since this interpretation is responsible for a degree of misunderstanding about the process itself and its intended aims. Diversity is an essential and immutable quality of Europe which is perceived to be one of its great strengths. Strict uniformity of medical specialist training, in common with other areas of professional and social activity which have evolved to satisfy specific requirements of individual European member countries, is neither practical nor desirable as an objective.

However, European Union law requires that certificates of completion of specialist training (CCST) issued by the competent authority of a member state must be recognised by all other member states. Most would agree that this is reasonable. But, in order to make the law practicable, it is essential that specialist training programmes throughout the EU should conform to certain agreed basic standards. In other words,
reciprocal recognition of qualifications is not feasible without first agreeing standards. Charged with this responsibility for vascular surgery, the Division of Vascular Surgery of the UEMS was established in 1992.

The Division has as its objective the promotion of a uniformly high standard of training in vascular surgery throughout the EU. A consensus on targets for duration, content and general principals for acceptable training programmes has been achieved without too much difficulty. But, there are problems for the Division in implementing the standards agreed upon. This is because the organisation and control of surgical training resides, quite rightly, with national authorities of individual member countries. Most do not have any direct affiliations with the UEMS and, historically, they do not show much inclination to heed recommendations offered by it. In order to influence European vascular surgical training more directly the decision was made to establish a European Board of Vascular Surgery with authority, under the statutes of the UEMS, to assess candidates for Board certification against the defined EU standards.

A European Board of Vascular Surgery (EBVS) within the “Envelope” of the European Board of Surgery

Initially, there was strong opposition to the establishment of a European Board of Vascular Surgery from the Speciality Section of Surgery and the EBS. However, following a series of meetings during the year, a formula was worked out to the satisfaction of all parties. Most importantly, this formula secures the future existence of a European Board of Vascular Surgery and thereby gives to vascular surgeons the power to regulate training in their speciality. At the same time, close ties with colleagues in other branches of surgery are retained in a way which ensures that the integrity of Surgery as a whole is not only preserved but is also strengthened. This is achieved through the EBS which will evolve to provide a framework or “common envelope” within which all surgical speciality groups are able to develop, following the example of vascular surgery.

According to the precedent which has now been established emerging Surgical Speciality Boards will each nominate two representatives to sit on the EBS. With this new constitution the EBS is well placed to respond to the rapid changes which continually affect surgical practice and to speak with a strong voice for all surgeons. From a practical viewpoint, the scheme has merit also in being compatible with arrangements currently in place in most EU member countries.

The following text represents a concise summary of the agreement reached between the Division of Vascular Surgery and the Section and Board of Surgery which is to be included as a “General Policy Statement” in the statutes of both the EBS and EBVS:

“The objectives of the European Board of Surgery (EBS) are to assess set standards for and progressively harmonise the content and quality of training and continuing medical education in all fields of surgery in member states of the European Union (EU).

There is a trend towards increasing specialisation within surgery which has progressed to different degrees in different parts of the EU and some of the fields of surgery encompassed by the EBS have become recognised in some countries as well-defined or even totally independent surgical specialities.

The trend towards greater specialisation is supported by the EBS whenever consistent with improved standards of clinical practice and training. However, in order to meet the needs of the many European hospitals which are not large enough to justify the same highly compartmentalised departments of surgery that have become the norm in most teaching centres, it is essential to ensure that surgeons are able to obtain broadly based training across all the various fields. This makes it essential for newly emerging surgical specialities to continue to collaborate closely within the well-defined framework of the EBS.

In order to encourage beneficial specialisation, while maintaining the integrity of surgery as a whole, it is the policy of the EBS to establish Surgical Speciality Boards to accommodate the special requirements of well defined areas of surgical practice. Surgical Speciality Boards have responsibility for establishing and monitoring standards of training within their specific field of surgery while the EBS functions as a common “envelope” to co-ordinate the interrelationship, recommendations and actions of the Surgical Speciality Boards, as they develop. The EBS will require input from the Speciality Boards in common trunk training. It is empowered to issue European Board Certificates of Quality of Training (EBSQ) in the surgical specialities on the recommendation of its Surgical Speciality Boards.”

European Board of Surgery Qualification in Vascular Surgery (EBSQ VASC.)

The EBVS is responsible for the content of the EBSQ.VASC assessments and for setting the standard.
The EBS is the central authority which will oversee all EBSQ assessments and grant certification to successful candidates on the recommendation of its Surgical Speciality Boards. For organisational, and financial, reasons it is important that EBSQ assessments in all surgical specialties should follow a similar structure to be co-ordinated by the EBS.

The following principles will apply to EBSQ.VASC certification:

1. Applicants must be citizens of an EU member state. EBSQ.VASC is NOT an entry examination which will permit medical graduates from other countries to practice vascular surgery within the EU.

2. It will be voluntary. In EU law, possession of a certificate of completion of specialist training (CCST) awarded by the competent national authority of one member state is the sole mandatory prerequisite for a surgeon to practise in any other member state and this ruling remains unchanged.

3. Possession of a valid CCST is an essential prerequisite for candidates wishing to apply for EBSQ.VASC certification.

4. The standard will be sufficiently high to ensure that it is regarded as an elitist qualification. It is intended that EBSQ.VASC certification will be accepted as evidence that the holder is trained to a standard appropriate to independent vascular surgical practice.

5. The candidates will be permitted to apply for EBSQ certification in more than one surgical specialty.

6. The EBSQ is to be self-financing, income being derived from fees chargeable to candidates.

7. The EBSQ-VASC is NOT intended to be an examination requiring intensive revision. It is to be a two part assessment of training experience. For Part 1 (eligibility) candidates will be required to provide details of their training experience on a standardised application form. Requirements for Part 1 must be met before proceeding to Part 2 and it is anticipated that this will be the principal discriminator between successful and unsuccessful applications. Part 2 will be a viva voce interview the purpose of which is to (a) verify that the information furnished by the candidate in Part 1 is an accurate reflection of his/her training experience (b) to assess his/her level of clinical expertise.

The target date set for the first interviews is 11th September 1996 to coincide with the back-to-back meetings of the European Society for Vascular Surgery and the European Chapter of the International Society for Cardiovascular Surgery in Venice. But, it will be some time before any beneficial effect on European standards of training in vascular surgery will be realised.

During the next year, the EBVS will be fully engaged in preparation for these first EBSQ.VASC assessments. The Division of Vascular Surgery, on the other hand, can now turn its attention to other matters.

P. L. Harris
President, Division and European Board of Vascular Surgery
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