

Honorary Secretary's Report

Mr Mike Wyatt

This has been a pivotal year for the Vascular Society as it continues to establish itself as a specialist society within each of the many relevant political circles of influence. Although the office resides within the Royal College of Surgeons of England, we are acutely aware that we represent members from each of the four Royal Colleges and are actively mindful of the fact that our activity should represent this intercollegiate responsibility. To this end we are endeavoring to arrange Council meetings at each of the Colleges in turn, and our recent visit as guests of the Royal College of Surgeons of Ireland was most well received.

We are also aware that as a Specialist Society we represent, not only members from the UK, but also Ireland. Nevertheless we only attract a small number of Irish Vascular Surgeons to the ranks of membership and your Council is actively engaged in recruiting and encouraging each and every vascular Surgeon practicing in the Republic to join the Society. The political change with respect to specialty status and the transparency of data provision to patients, public and regulators will soon be required of all Irish surgeons and we would welcome the opportunity to work with them as individuals, or as members of the Irish Association of Vascular Surgery (IAVS). Your President, VP elect and Honorary Secretary were warmly welcomed to the 2013 VSI meeting in Limerick and we hope that this is the start of a long and fruitful relationship.

Politically, it is apparent that the Department of Health (DoH) are wedded to the idea of "Surgeon Level Outcome Reporting". Your Society has been totally transparent on this issue and as you are aware was "hung out to dry" by several of the tabloid newspapers, despite strong pre-publication representations that there were no outliers and that it was not appropriate to use these data for the production of league tables. We have continued to support those few surgeons who were unfairly "targeted" and each has now completed their updates of individual data on the NVR website. David Mitchell has addressed this in his report, but it is imperative that as surgeons, we own our data and take responsibility for its inevitable presentation and appearance in the public domain. Surgeon Level Reporting is here to stay and we are mindful of the fact that next year, we will need to provide additional information to the DoH. It is imperative that this information is robust and it is only surgeons who can ensure that it is!

Your President and Council continue to represent the Society at meetings of each of the Royal Colleges, the FSSA (Federation of Surgical Specialty Associations) and with Government. If you have issues you would wish to raise at any of these forums please email us at <u>leanette@vascularsociety.org.uk</u> We have significant influence and are able to engage with all parties in order to provide the best care to patients with vascular disease in the developed world.



Your Council is actively engaged in a host of additional activities with representatives engaged with the Vascular Clinical Reference Group and as clinical advisors to the various regional reviews that are driving change in the provision of vascular services. We are fully engaged with the process of rationalization of vascular operations into a smaller number of major arterial centres, but are mindful of the need to protect activity at non arterial sites. To this end we are working closely with the vCRG to provide robust guidance and advice on how to effectively re-organise service to the benefit of patients, hospital trusts and surgeons.

Members of Council are also actively involved in advising NICE on their vascular documents, and have more recently been engaged by RCSE to advise on the approval of all new job plans in the UK. We have representatives on the intercollegiate board of the new vascular FRCS, the Vascular SAC and work closely with the General Surgery SAC to ensure that those trainees on existing general surgical programmes are not disadvantaged when it comes to applying for a Consultants post. To this end we are also working closely with radiologists through the RCR/VS/BSIR liaison group to deliver effective interventional/endovascular training to all trainees.

We have recently engaged with a highly successful National Selection process and our first 20 pure vascular trainees are now in post. The vascular SAC ran a highly successful "boot camp" for these highly impressive individuals and this will be taken forward by the VS Education Committee from next year.

You may have noticed the recent rebrand of the Society. This was timed to accompany our new Specialty Status and has been a tremendous success. My thanks to Neelam and Jeanette in the Office who, along with Lime Creative Ltd, have made this happen. This year at the AGM we have updated the website and added an App and a Twitter account. Please use these to ask direct questions to the Chair of each session and we will be most intrigued by your feedback. The yearbook reports are also electronic this year and can be accessed directly from the website at <u>www.vascularsociety.org.uk</u> or via the downloaded VS App.

This is a time of great change and challenge for your Society. We need your enthusiasm. We need your support. May we encourage each and everyone to get involved with the Vascular Society of Great Britain and Ireland. This can be on many levels from supporting our guidance documents, to assisting with regional reviews, organising charity events for the Circulation Foundation or by applying each year for Council. We need the brightest and the best to move forward with our Society. The future is bright. It's your future and we need your help.