Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

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Invited Commentary

A commentary on: "Consensus recommendations on balancing educational opportunities and service provision in surgical training: Association of Surgeons in Training Delphi qualitative study"

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The advent of strict European Working Time Regulations brought a substantial reduction in the cumulative training time in UK surgical training programmes [1]. As a result, there was a clear need to upscale the learning potential of training experiences, and to objectively and transparently document the learning experiences of each surgical trainee. The days of the apprentice and master model, with its consequent long-lasting and close-knit relationship are now gone, replaced by full-shift rotas, multiple supervisors, and extensive workplace-based assessment [2].

In this article, the Association of Surgeons in Training report consensus recommendations from an elected body of surgeons in training, formally representing all regions of the United Kingdom (UK), all surgical specialties and all stages of surgical training. As such, this group is particularly well placed to make such recommendations to leaders in UK surgical training [3].

There is, of course, substantial overlap between service and training activity, and a more junior trainee's clear training opportunity might equate to a more advanced colleague's undoubted service provision. This underlines the need for the contextual interpretation, as endorsed in this article. Furthermore, the way medical specialists are trained in the UK requires the combination of service and training, with funding for trainees sourced partly from the training programme, and partly from the National Health Service (NHS) provider organisation, within which they are employed. This is to say that the hospitals need the trainees to contribute to service provision in order that they can meet the local population's healthcare needs. If there was any doubt that surgeons in training are fully committed to service provision, as well as training, the COVID-19 pandemic has presented a timely reminder of the commitment of this crucial body of NHS workers. With virtually all clearly training activities placed on hold, countless examples emerged of these doctors being redeployed to other needful specialties, and volunteering to work in unfamiliar environments, quickly learning new skills.

ASiT's consensus exercise demonstrated firm agreement that training activities should have potential to impact on the trainee's learning curve, should be tailored to their ability, and should include activities involving teaching more junior colleagues. Thirteen recommendations were made, most of which are broad enough to allow for a tailored approach, rather than being prescriptively detailed.

It is encouraging that the exercise covered potential consequences of imbalance in training vs. service, particularly the mental health aspects of a demanding training programme, which invariably involves substantial stress-inducing activities and responsibilities, geographical upheaval at regular intervals, usually moving workplace or even city at 6- to 12-monthly intervals, and all spanning a period in life when starting and raising a family is most likely to occur.

Every surgeon's experience in training is unique. The duty of professional bodies delivering surgical training is to ensure that, despite this variation, every trainee has the opportunity to develop competence in all aspects of their curriculum, without compromising their own health and wellbeing. Crucially, the overarching objective must be to ensure the safety of every patient treated by the independently practicing professionals exiting such programmes. Enabling a balance between service and training is essential to this, and ASiT's recommendations and framework for programme assessment represent useful tools to achieve this.

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This type of article does not need ethical approval.

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No conflict of interest to declare.

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